Fill in this information to identify your ca	ase:	
United States Bankruptcy Court for the: NORTHERN DISTRICT OF TEXAS		
Case number (if known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13	☐ Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

P	art 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture	Andres First Name	First Name
	identification (for example, your driver's license or	Alberto	
	passport).	Middle Name	Middle Name
	F3.00F3.49.	Gomez	
	Bring your picture identification to your meeting	Last Name	Last Name
	with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2.	All other names you	Andres	
	have used in the last 8	First Name	First Name
	years	<u>A.</u>	
	Include your married or	Middle Name	Middle Name
	maiden names.	Gomez Last Name	Last Name
3.	Only the last 4 digits of your Social Security	xxx - xx - <u>0</u> <u>5</u> <u>3</u> <u>7</u>	xxx - xx
	number or federal Individual Taxpayer	OR	OR
	Identification number (ITIN)	9xx - xx	9xx - xx
4.	Any business names and Employer Identification Numbers	☑ I have not used any business names or EINs.	☐ I have not used any business names or EINs.
	(EIN) you have used in the last 8 years	Business name	Business name
	Include trade names and	Business name	Business name
	doing business as names	Pucinose namo	Pusinoss namo

First Name		12/10/15 14:53:49 Page 2 of 79 Case number (if known)
First Name	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case)
	EIN	
	EIN	EIN
. Where you live		If Debtor 2 lives at a different address:
	644 Timberline Drive	
	Number Street	Number Street
	Hurst TX 76053 City State ZIP Code	City State ZIP Code
	Tarrant	
	County	County
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to you at this mailing address.
	644 Timberline Drive	
	Number Street	Number Street
	P.O. Box	P.O. Box
	Hurst TX 76053 City State ZIP Code	City State ZIP Code
	City State Zir Code	Oily State ZIF Code
Why you are choosing	Check one:	Check one:
this district to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
	I have another reason. Explain. (See 28 U.S.C. § 1408.)	I have another reason. Explain. (See 28 U.S.C. § 1408.)
Part 2: Tell the Court	About Your Bankruptcy Case	
The chapter of the Bankruptcy Code you	Check one: (For a brief description of each, see N for Bankruptcy (Form 2010)). Also, go to the top of	Notice Required by 11 U.S.C. § 342(b) for Individuals F of page 1 and check the appropriate box.
are choosing to file under	Chapter 7	
	Chapter 11	
	Chapter 11	
	☐ Chapter 12	

and file it with this bankruptcy petition.

Deb	Case 15-44971-m>	m7 [Albert	2 00 (1 Filed 12/10/15	Entered 12/10/15 Case number (i	14:53:49 f known)	Page 4 of 79
	First Name	Middle N	ame	Last Name		, <u>—</u>	
Pa	Report About A	ny Βι	sine	sses You Own as a	Sole Proprietor		
12.	Are you a sole proprietor of any full- or part-time business?			Go to Part 4. Name and location of bu	siness		
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			Name of business, if any Number Street			
	If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.			Health Care Busine Single Asset Real Stockbroker (as de	ess (as defined in 11 U.S.C. § Estate (as defined in 11 U.S.C. § fined in 11 U.S.C. § 101(53A)) (as defined in 11 U.S.C. § 107	101(27A)) :. § 101(51B))	ZIP Code
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business</i>	can mos	set ap	propriate deadlines. If you	the court must know whether you indicate that you are a small ent of operations, cash-flow states, follow the procedure in	I business de atement, and	btor, you must attach your federal income tax return
	debtor?	$\overline{\mathbf{V}}$	No.	I am not filing under Cha	apter 11.		
	For a definition of small business debtor, see		No.	I am filing under Chapte the Bankruptcy Code.	er 11, but I am NOT a small bus	siness debtor	according to the definition in
	11 U.S.C. § 101(51D).		Yes.	I am filing under Chapte Bankruptcy Code.	er 11 and I am a small busines	s debtor acco	ording to the definition in the
P	art 4: Report If You C	wn or	Hav	e Any Hazardous P	roperty or Any Property	/ That Nee	ds Immediate Attention
14.	Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or		No Yes.	What is the hazard?			
	safety? Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed. or			If immediate attention is Where is the property?	needed, why is it needed?		

repairs?

a building that needs urgent

Number

City

Street

State

ZIP Code

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

Λ	ho	114	D_{Δ}	hta	r	1	

You must check one:

✓ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about	t
credit counseling because of:	

☐ Incapacity. I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not	required to	receive a	briefing	abou
credit co	ounselina b	ecause of	:	

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

P	art 6: Answer These 0	Questic	ns f	or Reporting Pu	rpos	ses		
16.	What kind of debts do you have?	16a.				sumer debts? Consurimarily for a personal,		are defined in 11 U.S.C. § 101(8) ousehold purpose."
		16b.						e debts that you incurred to obtain he business or investment.
		16c.	Stat	e the type of debts yo	u ow	e that are not consume	er or busines	ss debts.
17.	Are you filing under Chapter 7?		No.	I am not filing under	Chap	oter 7. Go to line 18.		
	Do you estimate that after any exempt property is	7	res.	•		•	-	exempt property is excluded and et of the contract of the cont
	excluded and administrative expenses			☑ No				
	are paid that funds will be available for distribution to unsecured creditors?			Yes				
18.	How many creditors do you estimate that you owe?		1-49 50-99 100-1 200-9	99		1,000-5,000 5,001-10,000 10,001-25,000		25,001-50,000 50,001-100,000 More than 100,000
19.	How much do you estimate your assets to be worth?		\$50,0 \$100,	0,000 01-\$100,000 001-\$500,000 001-\$1 million		\$1,000,001-\$10 millio \$10,000,001-\$50 millio \$50,000,001-\$100 milli \$100,000,001-\$500 m	ion Ilion	\$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion
20.	How much do you estimate your liabilities to be?		\$50,0 \$100,	0,000 01-\$100,000 001-\$500,000 001-\$1 million		\$1,000,001-\$10 millio \$10,000,001-\$50 milli \$50,000,001-\$100 mil \$100,000,001-\$500 m	ion Ilion	\$1,000,000,001-\$10 billion
P	art 7: Sign Below							
For	you	I have		•	ıd I d	eclare under penalty of	perjury tha	t the information provided is true
		or 13	of title		•			if eligible, under Chapter 7, 11, 12, nder each chapter, and I choose to
				• •		I not pay or agree to pand read the notice requi	•	who is an attorney to help me fill J.S.C. § 342(b).
		I requ	est re	elief in accordance wit	h the	chapter of title 11, Uni	ited States	Code, specified in this petition.
		conne	ection		se ca	n result in fines up to \$		g money or property by fraud in rimprisonment for up to 20 years,
		X /s/	/ Anc	lres Alberto Gome	z	X		
		Sig	gnatu	re of Debtor 1			Signature of	of Debtor 2
		Fx	ecute	ed on 12/10/2015			Executed of	nn

MM / DD / YYYY

MM / DD / YYYY

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

	s/ Carla R. Vida		Date	12/10/2015
S	Signature of Attorney for Debtor			MM / DD / YYYY
_	Carla R. Vida			
	rinted name			
	he Vida Law Firm, PLLC			
F	Firm Name			
3	8000 Central Drive			
Ν	lumber Street			
-				
-				
Е	Bedford	TX		76021
C	City	State		ZIP Code
C	Contact phone (817) 358-9977	Email address _		
1	6674445	TX		
	Bar number	State		_

Fill in this i	nformation to i	dentify your case	and this filing:	I	· ·
Debtor 1	Andres	Alberto	Gomez		
Debior 1	First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filir	ng) First Name	Middle Name	Last Name		
United States	Bankruptcy Court for	the: NORTHERN D	ISTRICT OF TEXAS		
Case number		<u></u>		_	
(if known)				_	if this is an ed filing
Official For	m 106Δ/R				
	A/B: Property	/			12/15
the asset in the filing together, sheet to this fo	e category where you both are equally re rm. On the top of a	ou think it fits best. B sponsible for supplyi ny additional pages,	st an asset only once. If an a e as complete and accurate a ng correct information. If mo write your name and case nung, Land, or Other Real I	s possible. If two married pe re space is needed, attach a s mber (if known). Answer eve	eople are separate ry question.
□ No. G	rn or have any lega So to Part 2. Where is the propert	·	in any residence, building, la	nd, or similar property?	
1.1. 644 Timberlin	e Dr., Hurst, Texa	Check all Single	ne property? that apply. e-family home ax or multi-unit building ominium or cooperative	Do not deduct secured clai amount of any secured clai Creditors Who Have Claim Current value of the entire property?	ms on Schedule D:
·		Land	ractured or mobile home ment property hare	Describe the nature of yo interest (such as fee simp entireties, or a life estate)	ole, tenancy by the
		Who has a	an interest in the property?	Fee Simple (homestead	d)
		☑ Debto ☐ Debto ☐ Debto	r 1 only r 2 only r 1 and Debtor 2 only st one of the debtors and anoth	Check if this is comm (see instructions)	unity property
			ormation you wish to add abo	ut this item, such as local	_
	-		of your entries from Part 1, in ite that number here		\$54,600.00
Part 2:	Describe Your V	ehicles			
-		•	n any vehicles, whether they a also report it on Schedule G:	_	-
3. Cars, vans	s, trucks, tractors, s	port utility vehicles, ı	motorcycles		
□ No ☑ Yes					

Official Form 106A/B Schedule A/B: Property page 1

Page 9 of 79 Case 15-44971-mxm7 Doc 1 Filed 12/10/15 Entered 12/10/15 14:53:49 **Alberto** Gomez Debtor 1 Case number (if known) First Name Middle Name Last Name 3.1. Do not deduct secured claims or exemptions. Put the Who has an interest in the property? Check one. amount of any secured claims on Schedule D: Make: Chrysler Creditors Who Have Claims Secured by Property. Debtor 1 only \square Model: Sebring Debtor 2 only Current value of the Current value of the 2006 Year: entire property? portion you own? П Debtor 1 and Debtor 2 only Approximate mileage: 106,300 At least one of the debtors and another \$3,000.00 \$3,000.00 Other information: 2006 Chrysler Sebring Check if this is community property (see instructions) 3.2. Who has an interest in the property? Do not deduct secured claims or exemptions. Put the Make: Ford Check one. amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. □ Debtor 1 only Model: Mustang Debtor 2 only Current value of the Current value of the П Year: 2012 entire property? portion you own? Debtor 1 and Debtor 2 only П Approximate mileage: At least one of the debtors and another \$17,000.00 \$17,000.00 Other information: Check if this is community property 2012 Ford Mustang third party possesion; third party pays (see instructions) direct; no equitable interest 3.3 Who has an interest in the property? Do not deduct secured claims or exemptions. Put the Check one. amount of any secured claims on Schedule D: Make: Renault Creditors Who Have Claims Secured by Property. ✓ Debtor 1 only Sandero Model: Current value of the Debtor 2 only Current value of the 2013 Year: entire property? portion you own? Debtor 1 and Debtor 2 only Approximate mileage: At least one of the debtors and another \$10,000.00 \$10,000.00 Other information: 2013 Renault Sandero Check if this is community property (see instructions) Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories **☑** No ☐ Yes Add the dollar value of the portion you own for all of your entries from Part 2, including any \$30,000.00 entries for pages you have attached for Part 2. Write that number here..... Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe..... Household goods and furnishings \$2,112.00 Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No Yes. Describe..... computer, printer, television, dvd player, stereo system, \$720.00 Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ☐ No \$1,130.00 Yes. Describe..... See continuation page(s).

Deb	Case	Andres	971-mxm7 Doc 1 Alberto	Gomez	Entered 12/10/15 14:53:49 Case number (if known)	Page 10 of 79
_		First Name	Middle Name	Last Name		
€.		es: Sports,		and other hobby equipm pols; musical instrument	ent; bicycles, pool tables, golf clubs, skis;	
	□ No ▼ Yes	. Describe.	See continuation	page(s).		\$250.00
10.	Firearm Example		rifles, shotguns, ammur	nition, and related equipn	nent	
	☐ No ✓ Yes	. Describe.	9mm handgun			\$400.00
11.	Clothes Example		ay clothes, furs, leather of	coats, designer wear, sho	pes, accessories	
	☐ No ✓ Yes	. Describe.	clothing and pers	sonal effects		\$1,000.00
12.	Jewelry Example			lry, engagement rings, v	vedding rings, heirloom jewelry, watches, gen	ns,
	□ No ✓ Yes	. Describe.	See continuation	page(s).		\$1,500.00
13.		m animals es: Dogs, c	ats, birds, horses			
	✓ No ☐ Yes	. Describe.				
14.	Any oth	-	l and household items	you did not already lis	t, including any health aids you	
		. Give spec				
15.				from Part 3, including	any entries for pages you have	\$7,112.00
Pa	art 4:	Describ	e Your Financial A	Assets		
Do y	ou own	or have an	y legal or equitable int	erest in any of the follo	wing?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	Cash Example	es: Money y	you have in your wallet,	in your home, in a safe c	leposit box, and on hand when you file your	
	□ No ☑ Yes	i			Cash:	\$500.00
17.	-	brokera	ng, savings, or other fina		es of deposit; shares in credit unions, nave multiple accounts with the same	
	□ No ✓ Yes	i		Institution name:		
	-	17.1.	Checking account:	BBVA Compass E	Bank; checking ending 412	\$200.00
		17.2.	Checking account:	Wells Farogo; che	ecking	\$100.00
		17.3.	Savings account:	BBVA Compass E	Bank; savings	\$325.00
		17.4.	Savings account:	American Airlines	; savings	\$7.00

First Name	Middle Name	Last Name		
Danda mutual funda a				
Bonds, mutual funds, o		s n brokerage firms, money m	arket accounts	
✓ No	common accounte ma	. Dronoragoo,oo,		
-	. Institution or issuer n	ame:		
_				
Non-publicly traded sto	ck and interests in inco	orporated and unincorpor	ated businesses, including	
an interest in an LLC, p		-	g	
☑ No				
Yes. Give specific				
information about them	. Name of entity:		% of owners	hip:
	•	egotiable and non-negotia		···
		_	ry notes, and money orders.	
		transfer to someone by sig		
☑ No				
Yes. Give specific	Issuer name:			
information about them				
Retirement or pension a				
Examples: Interests in IF	RA, ERISA, Keogh, 401(I	x), 403(b), thrift savings acc	counts, or other pension or	
Examples: Interests in IF profit-sharing	RA, ERISA, Keogh, 401(I	k), 403(b), thrift savings acc	counts, or other pension or	
Examples: Interests in IF profit-sharing No	RA, ERISA, Keogh, 401(l plans	x), 403(b), thrift savings acc	counts, or other pension or	
Examples: Interests in IF profit-sharing	RA, ERISA, Keogh, 401(I plans Type of account:	Institution name:	·	\$07,000
Examples: Interests in IF profit-sharing No Yes. List each	RA, ERISA, Keogh, 401(I plans Type of account: 401(k) or similar plan:		·	\$97,900.
Examples: Interests in IF profit-sharing No Yes. List each	RA, ERISA, Keogh, 401(I plans Type of account:	Institution name:	·	\$97,900.
Examples: Interests in IF profit-sharing ☐ No ☐ Yes. List each	RA, ERISA, Keogh, 401(I plans Type of account: 401(k) or similar plan:	Institution name:	·	\$97,900.
Examples: Interests in IF profit-sharing No Yes. List each	RA, ERISA, Keogh, 401(I plans Type of account: 401(k) or similar plan: Pension plan:	Institution name:	·	\$97,900.
Examples: Interests in IF profit-sharing No Yes. List each	RA, ERISA, Keogh, 401(I plans Type of account: 401(k) or similar plan: Pension plan: IRA: Retirement account:	Institution name:	·	\$97,900.
Examples: Interests in IF profit-sharing No Yes. List each	RA, ERISA, Keogh, 401(I plans Type of account: 401(k) or similar plan: Pension plan: IRA: Retirement account: Keogh:	Institution name:	·	\$97,900.
Examples: Interests in IF profit-sharing ☐ No ☐ Yes. List each	RA, ERISA, Keogh, 401(I plans Type of account: 401(k) or similar plan: Pension plan: IRA: Retirement account:	Institution name:	·	\$97,900.
Examples: Interests in IF profit-sharing No Yes. List each	RA, ERISA, Keogh, 401(I plans Type of account: 401(k) or similar plan: Pension plan: IRA: Retirement account: Keogh:	Institution name: AA Super Saver 401(k	·	\$97,900.
Examples: Interests in IF profit-sharing No Yes. List each	RA, ERISA, Keogh, 401(I plans Type of account: 401(k) or similar plan: Pension plan: IRA: Retirement account: Keogh: Additional account: Additional account:	Institution name: AA Super Saver 401(k)	\$97,900.
Examples: Interests in IF profit-sharing No Yes. List each account separately. Security deposits and profit your share of all unused	RA, ERISA, Keogh, 401(I plans Type of account: 401(k) or similar plan: Pension plan: IRA: Retirement account: Keogh: Additional account: Additional account: orepayments deposits you have made	Institution name: AA Super Saver 401(k	service or use from a company	\$97,900.
Examples: Interests in IF profit-sharing No Yes. List each account separately. Security deposits and profit your share of all unused Examples: Agreements of the profit	RA, ERISA, Keogh, 401(I plans Type of account: 401(k) or similar plan: Pension plan: IRA: Retirement account: Keogh: Additional account: Additional account: orepayments deposits you have made	Institution name: AA Super Saver 401(k		\$97,900.
Examples: Interests in IF profit-sharing No Yes. List each account separately. Security deposits and profit your share of all unused Examples: Agreements to companies, or others	RA, ERISA, Keogh, 401(I plans Type of account: 401(k) or similar plan: Pension plan: IRA: Retirement account: Keogh: Additional account: Additional account: orepayments deposits you have made	Institution name: AA Super Saver 401(k	service or use from a company	\$97,900.
Examples: Interests in IF profit-sharing No Yes. List each account separately. Security deposits and profit your share of all unused Examples: Agreements with companies, or others No	RA, ERISA, Keogh, 401(I plans Type of account: 401(k) or similar plan: Pension plan: IRA: Retirement account: Keogh: Additional account: Additional account: orepayments deposits you have made with landlords, prepaid re	AA Super Saver 401(k	service or use from a company gas, water), telecommunications	\$97,900.
Examples: Interests in IF profit-sharing No Yes. List each account separately. Security deposits and profit your share of all unused Examples: Agreements of companies, or others No Yes	RA, ERISA, Keogh, 401(I plans Type of account: 401(k) or similar plan: Pension plan: IRA: Retirement account: Keogh: Additional account: Additional account: orepayments deposits you have made with landlords, prepaid references.	Institution name: AA Super Saver 401(k e so that you may continue ent, public utilities (electric, estitution name or individual:	service or use from a company gas, water), telecommunications	
Examples: Interests in IF profit-sharing No Yes. List each account separately. Security deposits and profit your share of all unused Examples: Agreements with companies, or others No Yes	RA, ERISA, Keogh, 401(I plans Type of account: 401(k) or similar plan: Pension plan: IRA: Retirement account: Keogh: Additional account: Additional account: orepayments deposits you have made with landlords, prepaid references.	Institution name: AA Super Saver 401(k e so that you may continue ent, public utilities (electric, estitution name or individual:	service or use from a company gas, water), telecommunications	
Examples: Interests in IF profit-sharing No Yes. List each account separately. Security deposits and profit your share of all unused Examples: Agreements with companies, or others No Yes	RA, ERISA, Keogh, 401(I plans Type of account: 401(k) or similar plan: Pension plan: IRA: Retirement account: Keogh: Additional account: Additional account: orepayments deposits you have made with landlords, prepaid references.	e so that you may continue ent, public utilities (electric, stitution name or individual: ment of money to you, either	service or use from a company gas, water), telecommunications	
Examples: Interests in IF profit-sharing No Yes. List each account separately. Security deposits and profit your share of all unused Examples: Agreements with companies, or others No Yes	RA, ERISA, Keogh, 401(I plans Type of account: 401(k) or similar plan: Pension plan: IRA: Retirement account: Keogh: Additional account: Additional account: orepayments deposits you have made with landlords, prepaid reserved in the present of the present of the present of the plant of the	e so that you may continue ent, public utilities (electric, stitution name or individual: ment of money to you, either	service or use from a company gas, water), telecommunications	
Examples: Interests in IF profit-sharing No Yes. List each account separately. Security deposits and profit your share of all unused Examples: Agreements with companies, or others No Yes	RA, ERISA, Keogh, 401(I plans Type of account: 401(k) or similar plan: Pension plan: IRA: Retirement account: Keogh: Additional account: Additional account: orepayments deposits you have made with landlords, prepaid reserved in the present of the present of the present of the plant of the	e so that you may continue ent, public utilities (electric, stitution name or individual: ment of money to you, either	service or use from a company gas, water), telecommunications	

Deb	Case	⊖ 15-44971-ı Andres	mxm7 Doc 1 Alberto	Filed 12/10/15 Gomez	Entered	12/10/15 14:53: Case number (if known		Page 12 of 79	9
00		First Name	Middle Name	Last Name					
24.			n IRA, in an accou 29A(b), and 529(b)(•	E program, or	under a qualified state t	uition pr	ogram.	
	✓ No	S	Institution name	and description. Sep	arately file the r	ecords of any interests.	11 U.S.C.	. § 521(c)	
25.		equitable or futu exercisable for y		perty (other than any	thing listed in	line 1), and rights or			
		s. Give specific ormation about the	m						
26.				rets, and other intell , proceeds from royalt		•			
		s. Give specific ormation about the	m						
27.			nd other general in its, exclusive licens	-	ciation holdings	, liquor licenses, professi	onal licen	ses	
		s. Give specific ormation about the	m						
Mor	ney or pr	operty owed to y	ou?					Current value of portion you own Do not deduct sec claims or exempti	? cured
28.	Tax ref	unds owed to you	ı						
	✓ No	s. Give specific inf	formation				Federa	ı· \$	0.00
	abo	out them, including already filed the r	whether				State:		60.00
	-	I the tax years					Local:	\$	0.00
29.	-	support les: Past due or lu	mp sum alimony, sլ	oousal support, child s	support, mainte	nance, divorce settlemen	it, propert	y settlement	
	☑ No								
	Yes	s. Give specific inf	formation			Alimony:			0.00
						Maintena	nce.		0.00 60.00
						Support: Divorce s	attlament		60.00 60.00
						Property s			0.00
30.	Other a	mounts someone	e owes you						
	Exampl		•	e payments, disability enefits; unpaid loans y		pay, vacation pay, worker neone else	s'		
	✓ No ☐ Yes	s. Give specific int	formation						

Deb	tor 1	Andres	Alberto	Gomez	Lillereu	Case number (if known		•
		First Name	Middle Name	Last Name		,	´	
31.		ts in insurance poli es: Health, disability		: health savings accou	unt (HSA): cred	it, homeowner's, or rente	er's insura	nce
	□ No	, , , , , , , , , , , , , , , , , , , ,	,,,	, <u>G</u>	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,		
	✓ Yes	. Name the insuran		ame:	В	eneficiary:	Su	rrender or refund value:
		list its value	aralin tarr	n life insurance pol	licy			\$0.00
32.	If you a	re the beneficiary of	a living trust, expe	m someone who has		licy, or are currently		
	No No	to receive property I	because someone	e rias died				
		. Give specific info	rmation					
33.				t you have filed a law insurance claims, or ri		a demand for payment		
	✓ No ☐ Yes	s. Describe each cla	ıim					
34.		ontingent and unlic	quidated claims o	of every nature, inclu	ding counterc	laims of the debtor and	i	
	✓ No ☐ Yes	. Describe each cla	ıim					
35.	Any fin	ancial assets you o	lid not already lis	st				
	✓ No ☐ Yes	. Give specific info	rmation					
36.	Add the	e dollar value of all d for Part 4. Write	of your entries fr	om Part 4, including	any entries fo	r pages you have		\$99,032.17
Pa	art 5:	Describe Any B	usiness-Relat	ed Property You	Own or Hav	/e an Interest In. L	ist any	real estate in Part 1
37.	Do you	own or have any le	egal or equitable	interest in any busing	ess-related pr	operty?		
		Go to Part 6. Go to line 38.						
	_							
								Current value of the portion you own? Do not deduct secured claims or exemptions.
38.	Accour	nts receivable or co	mmissions you a	already earned				ciains of exemptions.
	✓ No ☐ Yes	. Describe						
39.	Exampl		•		s, copiers, fax r	machines, rugs, telephor	nes,	
	✓ No ☐ Yes	. Describe						
40.	Machin	ery, fixtures, equip	ment, supplies y	ou use in business, a	and tools of yo	our trade		
	✓ No ☐ Yes	. Describe						

	Case	15-4497	1-mxm7 Doc 1 F	iled 12/10/15	Entered 12/10/15 14:53:49	Page 14 of 79
Deb		Andres	Alberto	Gomez	Case number (if known)	-
	_	First Name	Middle Name	Last Name		
41.	Invento	ry				
	☑ No					
	Yes	. Describe				
42.	Interest	s in partnersh	ips or joint ventures			
	☑ No					
	☐ Yes	. Describe	Name of entity:		% of ownership	
13	Custom	or liete mailir	ng lists, or other compi	lations		
43.		iei iisis, iiiaiiii	ig lists, or other compr	iations		
	✓ No ☐ Yes	Do your lists	s include nersonally ide	entifiable informatio	n (as defined in 11 U.S.C. § 101(41A))?	
	□	□ No	o morado por conany ra			
		Yes. De	escribe			
44.	Any bu	siness-related	property you did not a	Iready list		
	⋈ No					
	Yes	. Give specific	;			
	info	rmation				
						_
			_			_
						_
45.					any entries for pages you have	\$0.00
	attache	d for Part 5. V	Vrite that number here.			Ψ0.00
Pa	art 6:	Describe Ar	ny Farm- and Comr	nercial Fishing-F	Related Property You Own or Have	an Interest In.
			have an interest in t			
	_					
46.	-		any legal or equitable in	iterest in any farm- o	or commercial fishing-related property?	
		Go to Part 7.	,			
	☐ Yes	. Go to line 47				
						Current value of the
						portion you own?
						Do not deduct secured claims or exemptions.
47.	Farm a		manufem of the state of the sta			,
		es: Livestock,	poultry, farm-raised fish			
	✓ No ☐ Yes					
1 2	_		g or harvested			
-10 .	-	einier growing	y or marvesteu			
	✓ No	. Give specific				
	_	rmation				

Deb	Case 15-4497 otor 1 Andres First Name	71-mxm7 Doc 1 Alberto Middle Name	Filed 12/10/15 Gomez Last Name		0/15 14:53:49 umber (if known)	Pag	je 15 of 79
49.		quipment, implements,		and tools of trade			
	✓ No Yes	,	, ,,			_	
50.	Farm and fishing su	upplies, chemicals, and	feed				
	✓ No ☐ Yes					_	
51.	Any farm- and com	mercial fishing-related	property you did not	already list			
	No Yes. Give specifinformation					_	
52.			_	any entries for pages y		→	\$0.00
P	art 7: Describe A	All Property You O	wn or Have an In	terest in That You I	Did Not List Abo	ove	
53.		property of any kind yo ickets, country club mem		?			
	No Yes. Give specifinformation						
		_					
54.	Add the dollar value	e of all of your entries f	rom Part 7. Write tha	at number here		→	\$0.00
P	art 8: List the To	otals of Each Part o	of this Form				
55.	Part 1: Total real es	state, line 2				→ _	\$54,600.00
56.	Part 2: Total vehicle	es, line 5		\$30,000.00			
57.	Part 3: Total person	nal and household item	s, line 15	\$7,112.00			
58.	Part 4: Total financi	ial assets, line 36		\$99,032.17			
59.	Part 5: Total busine	ess-related property, lin	e 45	\$0.00			
60.	Part 6: Total farm- a	and fishing-related prop	perty, line 52	\$0.00			
61.	Part 7: Total other p	property not listed, line	54 +	. \$0.00			
62.	Total personal prop	perty. Add lines 56 thro	ough 61	\$136,144.17	Copy personal property total	+_	\$136,144.17
63.	Total of all property	on Schedule A/B. A	dd line 55 + line 62				\$190,744.17

	Cas	se 15-449/1	-mxm/ Doc 1 F	·lied 12/10/15	Entered	1 12/10/15 14:53:49	Page 16 of 79
Deb	tor 1	Andres	Alberto	Gomez		Case number (if known)	_
		First Name	Middle Name	Last Name		· ,	
8.	Colle	ctibles of value (d	letails):				
	book	s, records, tape	es, cds, dvds				\$130.00
	misc	. coins					\$1,000.00
9.	Equip	oment for sports a	and hobbies (details):				
	came	era					\$200.00
	fishir	ng equipment					\$50.00
12.	Jewe	lry (details):					
	rings	5					\$300.00
	watc	hes					\$100.00
	wedo	ding rings					\$1,100.00

Case 15-	-44971-mxm	17 Doc 1 Fi	led 12/10/15	En	itered 12/10	/15 14:53:49	Page 17 of 79
Fill in this inf	ormation to id	entify your o	case:				
Debtor 1	Andres	Alberto	Gomez				
Debtor 2	First Name	Middle Name	Last Name				
(Spouse, if filing)	First Name	Middle Name	Last Name				
United States Bar	nkruptcy Court for	the: NORTHE	RN DISTRICT OF T	EX/	AS	☐ Che	eck if this is an
Case number (if known)						am	ended filing
Official Form	106C						
Schedule C:	The Prope	rty You Cl	aim as Exemp	ot			12/15
Using the property	you listed on <i>Scho</i> ll out and attach to	edule A/B: Prope this page as m	erty (Official Form 106	SA/B)	as your source, li	ist the property that y	upplying correct information. You claim as exempt. If more op of any additional pages,
exempted up to the receive certain be exemption of 100% property is detern	ne amount of any nefits, and tax-ex % of fair market v nined to exceed the	applicable stat tempt retiremer alue under a la hat amount, yo	ternatively, you may utory limit. Some ex trendsmay be unling the execute text and the execute execute the execute exemption would	emp imite mpti	tionssuch as the d in dollar amou on to a particular	ose for health aids nt. However, if you dollar amount and	rights to claim an the value of the
Part 1: Ide	ntify the Prop	erty You Cla	im as Exempt				
1. Which set of	exemptions are y	ou claiming?	Check one only, e	even	if your spouse is t	filing with you.	
—	claiming state and claiming federal ex		kruptcy exemptions.	11 U.	S.C. § 522(b)(3)		
<u></u>	-						
			at you claim as exen	•			
Brief description of Schedule A/B that			Current value of the portion you own		ount of the mption you clain	•	s that allow exemption
			Copy the value from Schedule A/B		eck only one box for h exemption	or	
Brief 644 1	Γimberline Dr., Ι	Hurst,	\$54,600.00	П		11 U.S.C. §	522(d)(1)
description: Texa Line from Schedule A/B:	· ·	ŕ			100% of fair mar value, up to any applicable statut limit	ket	,,,,
	Chrysler Sebri	ng	\$3,000.00			11 U.S.C. §	522(d)(2)
description: Line from Schedule A/B:	3.1				100% of fair mar value, up to any applicable statut limit		
-	-	•	more than \$155,675? rears after that for cas		ed on or after the	date of adjustment.)	

No Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
□ No □ Yes

Debtor 1 Andres Alberto Gomez Case number (if known) ________

Part 2: Additional	Page			
Brief description of the pro Schedule A/B that lists this		Current value of the portion you own	ount of the mption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	ck only one box for h exemption	
Brief 2013 Renault description: Line from Schedule A/B: 3.3	: Sandero	\$10,000.00	100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(2)
			100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
Brief Household g description: furnishings Line from Schedule A/B: 6	oods and	\$2,112.00	100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
	inter, television, tereo system,	\$720.00	\$720.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Brief books, recordescription: dvds Line from Schedule A/B: 8	ds, tapes, cds,	\$130.00	100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Brief misc. coins description: Line from Schedule A/B: 8		\$1,000.00	100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
Brief camera description: Line from Schedule A/B:		\$200.00	100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Brief fishing equip description: Line from Schedule A/B: 9	ment	\$50.00	100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Brief 9mm handgudescription: Line from Schedule A/B: 10	ın	\$400.00	\$400.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)

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Debtor 1 Andres Alberto Gomez Case number (if known)
First Name Middle Name Last Name

Part 2:	Additional Page				
	ion of the property and line on that lists this property	Current value of the portion you own		ount of the mption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B		eck only one box for h exemption	
Brief c description:	lothing and personal effects	\$1,000.00		100% of fair market	11 U.S.C. § 522(d)(3)
Line from Schedule A/B:	11			value, up to any applicable statutory limit	
Brief r description:	ings	\$300.00		100% of fair market	11 U.S.C. § 522(d)(4)
Line from Schedule A/B:	12			value, up to any applicable statutory limit	
Brief v description:	vatches	\$100.00		100% of fair market	11 U.S.C. § 522(d)(4)
Line from Schedule A/B:	12			value, up to any applicable statutory limit	
Brief volume description:	vedding rings	\$1,100.00		100% of fair market	11 U.S.C. § 522(d)(4)
Line from Schedule A/B:	12		Ι Δ Ι	value, up to any applicable statutory limit	
Brief c	ash on hand	\$500.00		100% of fair market	11 U.S.C. § 522(d)(5)
Line from Schedule A/B:	16		$\overline{\mathbf{A}}$	value, up to any applicable statutory limit	
	BBVA Compass Bank; hecking ending 412	\$200.00		100% of fair market	11 U.S.C. § 522(d)(5)
Line from Schedule A/B:			K	value, up to any applicable statutory limit	
Brief Edescription:	BBVA Compass Bank; savings	\$325.00		100% of fair market	11 U.S.C. § 522(d)(5)
Line from Schedule A/B:	17.3			value, up to any applicable statutory limit	
Brief V description:	Vells Farogo; checking	\$100.00		100% of fair market	11 U.S.C. § 522(d)(5)
Line from Schedule A/B:	17.2		I ▼ J	value, up to any applicable statutory limit	
Brief Adescription:	American Airlines; savings	\$7.00		100% of fair market	11 U.S.C. § 522(d)(5)
Line from Schedule A/B:	17.4		ت	value, up to any applicable statutory limit	

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Debtor 1	Andres	Alberto	Gomez	Case numbe	r (if known)
	First Name	Middle Name	Last Name		
Part 2:	Additional	Page			
	ription of the pro A/B that lists this	perty and line on property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description:	AA Super Sa	ver 401(k)	\$97,900.17	☐ 100% of fair market	11 U.S.C. § 522(d)(10)(E)
Line from Schedule A	/B: 21			value, up to any applicable statutory limit	
Brief description: Line from Schedule A	pa,	fe insurance	\$0.00	100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(7)

Case 13	44311-111	III DOC I I IIEU	12/10/13 L	intered 12/10/13	14.33.43 Fage	21 01 7 9
Fill in this info	ormation to i	dentify your case				
Debtor 1	Andres	Alberto	Gomez			
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bar	nkruptcy Court fo	or the: NORTHERN D	ISTRICT OF TEX	AS		
Case number				_	☐ Check if this is	s an
(if known)					amended filing	
	Creditors	Who Have Cla				12/15
correct informatio	n. If more spac		Additional Page, f	ill it out, number the er	ally responsible for sup tries, and attach it to thi	
•		s secured by your prop	•			
	ck this box and s in all of the infor		ourt with your other	schedules. You have n	othing else to report on th	is form.
Part 1: Lis	t All Secured	l Claims				
claim, list the creditor has a	creditor separate particular claim, ible, list the clain	creditor has more than or ely for each claim. If mo list the other creditors in ns in alphabetical order	ore than one n Part 2. As	Column A Amount of claim Do not deduct the value of collateral	that supports this	Column C Unsecured portion If any
2.1		Describe the secures the	property that	\$17,284.9	0 \$17,000.00	\$284.90
Ally Loan		2012 Ford M				
Creditor's name PO Box 380902 Number Street			nustarig			
- Street						
Bloomington City	MN 55438 State ZIP Cod			m is: Check all that app	y.	
·		☐ Unliquida				
Who owes the deb ☐ Debtor 1 only	ot? Check one	Disputed	iou			
Debtor 2 only		Nature of lie	n. Check all that a	pply.		
☐ Debtor 1 and D		—		ch as mortgage or secur	ed car loan)	
At least one of	the debtors and	_		en, mechanic's lien)		
Check if this c		_	t lien from a lawsuit cluding a right to off			
Date debt was inc	urred	Last 4 digits	of account numbe	er <u>0 8 2 6</u>		

Add the dollar value of your entries in Column A on this page. Write that number here:

\$17,284.90

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Andres Alberto Gomez Debtor 1 Case number (if known) First Name Middle Name Last Name Column A Column B Column C **Additional Page** Amount of claim Value of collateral Unsecured Part 1: After listing any entries on this page, number them Do not deduct the that supports this portion sequentially from the previous page. value of collateral claim If any Describe the property that 2.2 \$54,000.00 \$54,600.00 secures the claim: American Airlines Federal Credit Unic 644 Timberline Dr., Hurst, **Texas** PO Box 619001 Number Street MD2100 As of the date you file, the claim is: Check all that apply. **DFW Airport** 75261-9001 TX ☐ Contingent ZIP Code Unliquidated Who owes the debt? Check one. ☐ Disputed Debtor 1 only Debtor 2 only Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Debtor 1 and Debtor 2 only ☐ Statutory lien (such as tax lien, mechanic's lien) At least one of the debtors and another Judgment lien from a lawsuit ☐ Check if this claim relates Other (including a right to offset) Fee Simple (homestead)

Last 4 digits of account number

Add the dollar value of your entries in Column A on this page. Write that number here:

\$54,000.00

5 4 0 1

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$71,284.90

to a community debt

Date debt was incurred

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Case 13)-4431 I-IIIAI	III DOC I I III	ed 12/10/15 Littered	1 12/10/13 14.33.	49 raye 2	.5 01 7 5
Fill in this in	formation to i	dentify your ca	ase:			
Debtor 1	Andres	Alberto	Gomez			
	First Name	Middle Name	Last Name	_		
Debtor 2						
(Spouse, if filing	j) First Name	Middle Name	Last Name	_		
United States Ba	ankruptcy Court fo	or the: NORTHER	N DISTRICT OF TEXAS	_		
Case number				_	_	
(if known)	-				Check if this is a amended filing	an
					amended ming	
Official Form	n 106F/F					
		\4/	. Umaaassuud Olaimaa			40/45
Schedule E	:/F: Creditol	's wno Have	Unsecured Claims			12/15
1. Do any cred No. Go Yes. 2. List all of yo	itors have priorit to Part 2.	y unsecured clain	ns against you? creditor has more than one prioriclaim it is. If a claim has both p			
show both pr more space i	iority and nonprior	rity amounts. As m rity unsecured claim	uch as possible, list the claims in ns, fill out the Continuation Page	n alphabetical order acco	rding to the credito	or's name. If
(For an expla	anation of each typ	oe of claim, see the	instructions for this form in the i	instruction booklet. Total claim	Priority amount	Nonpriority amount
2.1				\$0.00	\$0.00	\$0.00
Cynthia Gomez	2		Last 4 digits of account numb			
Priority Creditor's Nar 8963 River Fall:			_			
Number Street	<u> </u>		When was the debt incurred?			
			As of the date you file, the cla	im is: Check all that app	ly.	
Fort Worth City	TX State	76118 ZIP Code	Contingent Unliquidated			
Who incurred the			Disputed			
Debtor 1 only			Type of PRIORITY unsecured	claim:		
Debtor 2 only Debtor 1 and			Domestic support obligation			
	of the debtors and	another	Taxes and certain other del	bts you owe the governm	ent	
Check if this	claim is for a co	mmunity debt	Claims for death or personal intoxicated	al injury while you were		
Is the claim subject	ect to offset?		Other. Specify			
✓ No Yes						

Case 15-44971-mxm7 Doc 1 Filed 12/10/15 Entered 12/10/15 14:53:49 Page 24 of 79 **Alberto** Debtor 1 Andres Gomez Case number (if known) First Name Middle Name Last Name Part 2: List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with you other schedules. \square List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If more space is needed for nonpriority unsecured claims, fill out the Continuation Page of Part 2. **Total claim** 4.1 \$13,933.00 **American Airlines FCU** Last 4 digits of account number 0 5 0 8 Nonpriority Creditor's Name When was the debt incurred? PO Box 619001 As of the date you file, the claim is: Check all that apply. Number Street MD2100 Contingent Unliquidated **DFW Airport** TX 75261-9001 Disputed City State ZIP Code Check one. Who incurred the debt? Type of NONPRIORITY unsecured claim: Debtor 1 only ☐ Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim is for a community debt Other. Specify Credit Account Is the claim subject to offset? **☑** No ☐ Yes 4.2 \$1,265.79 Last 4 digits of account number **American Express** 1 0 0 8 Nonpriority Creditor's Name When was the debt incurred? PO Box 650468 As of the date you file, the claim is: Check all that apply. Number Contingent Unliquidated **Dallas** TX 75265-0448 Disputed City State ZIP Code Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only ☐ Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts

Check if this claim is for a community debt

Is the claim subject to offset?

✓ No ☐ Yes Other. Specify Credit Account

Case number (if known)

Gomez

Alberto

Debtor 1

First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page After listing any entries on this page, number them sequentially from the **Total claim** previous page. 4.3 \$1,300.00 Banana Republic Last 4 digits of account number 8 7 6 7 Nonpriority Creditor's Name When was the debt incurred? PO Box 530942 As of the date you file, the claim is: Check all that apply. Number Contingent Unliquidated 30353-0942 **Atlanta** GA Disputed City State **ZIP Code** Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only ☐ Student loans Debtor 2 only П Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts ☐ Check if this claim is for a community debt Other. Specify Credit Account Is the claim subject to offset? **☑** No ☐ Yes 4.4 Unknown **Bank of America** Last 4 digits of account number 2 8 4 1 Nonpriority Creditor's Name When was the debt incurred? PO Box 5170 As of the date you file, the claim is: Check all that apply. Number Contingent Unliquidated Simi Valley CA 93062-5170 Disputed City Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: □ Debtor 1 only □ Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts ☐ Check if this claim is for a community debt Other. Specify Deficiency balance on previously so Is the claim subject to offset? **☑** No Yes 4.5 \$7,747.69 Barclay's Bank/ Juniper Last 4 digits of account number 3 3 2 5 Nonpriority Creditor's Name When was the debt incurred? 125 S. West St. As of the date you file, the claim is: Check all that apply. ☐ Contingent Unliquidated Wilmington DE 19801 Disputed City State **7IP Code** Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only ☐ Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts ☐ Check if this claim is for a community debt Other. Specify Credit Account Is the claim subject to offset? **☑** No Yes

Case number (if known)

Gomez

Alberto

Debtor 1

First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page After listing any entries on this page, number them sequentially from the **Total claim** previous page. 4.6 \$1,203.40 **Best Buy** Last 4 digits of account number 4 9 5 6 Nonpriority Creditor's Name When was the debt incurred? PO Box 78009 As of the date you file, the claim is: Check all that apply. Number Contingent Unliquidated **Phoenix** 85062-8009 Disputed City State ZIP Code Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only ☐ Student loans Debtor 2 only П Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts ☐ Check if this claim is for a community debt Other. Specify Credit Account Is the claim subject to offset? **☑** No ☐ Yes 4.7 \$1,135.83 Capital One Last 4 digits of account number 3 2 8 2 Nonpriority Creditor's Name When was the debt incurred? PO Box 60599 As of the date you file, the claim is: Check all that apply. Number Contingent Unliquidated City of Industry CA 91716-0599 Disputed City State Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only □ Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts ☐ Check if this claim is for a community debt Other. Specify Credit Account Is the claim subject to offset? **☑** No Yes 4.8 \$3,364.10 Last 4 digits of account number 3 5 6 7 Chase Nonpriority Creditor's Name When was the debt incurred? PO Box 15123 As of the date you file, the claim is: Check all that apply. ☐ Contingent Unliquidated 19850-5123 Wilmington DE □ Disputed City State ZIP Code Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only ☐ Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts ☐ Check if this claim is for a community debt Other. Specify Credit Account Is the claim subject to offset? **☑** No Yes

Case number (if known)

Gomez

Alberto

Debtor 1

First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page After listing any entries on this page, number them sequentially from the **Total claim** previous page. 4.9 \$3,259.00 Citi Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO Box 78045 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated **Phoenix** 85062-8045 Disputed City State ZIP Code Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only ☐ Student loans Debtor 2 only П Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts ☐ Check if this claim is for a community debt Other. Specify Credit Account Is the claim subject to offset? **☑** No ☐ Yes 4.10 \$1,886.15 Citi Last 4 digits of account number 9 5 6 2 Nonpriority Creditor's Name When was the debt incurred? PO Box 78045 As of the date you file, the claim is: Check all that apply. Number Contingent Unliquidated **Phoenix** Δ7 85062-8045 Disputed State Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only □ Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts ☐ Check if this claim is for a community debt Other. Specify Credit Account Is the claim subject to offset? **☑** No Yes 4.11 \$2,837.09 Citi Last 4 digits of account number <u>4 4 3 9</u> Nonpriority Creditor's Name When was the debt incurred? PO Box 78045 As of the date you file, the claim is: Check all that apply. ☐ Contingent Unliquidated 85062-8045 **Phoenix** ΑZ □ Disputed City State **7IP Code** Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only ☐ Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts ☐ Check if this claim is for a community debt Other. Specify Credit Account Is the claim subject to offset? ✓ No Yes

Case number (if known)

Gomez

Alberto

Debtor 1

First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page After listing any entries on this page, number them sequentially from the **Total claim** previous page. 4.12 \$1,896.15 Citi Last 4 digits of account number 9 5 4 2 Nonpriority Creditor's Name When was the debt incurred? PO Box 78045 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated **Phoenix** 85062-8045 Disputed City State ZIP Code Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only ☐ Student loans Debtor 2 only П Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts ☐ Check if this claim is for a community debt Other. Specify Credit Account Is the claim subject to offset? **☑** No ☐ Yes 4.13 \$2,077.97 Citibank Last 4 digits of account number 0 0 6 5 Nonpriority Creditor's Name When was the debt incurred? PO Box 78045 As of the date you file, the claim is: Check all that apply. Number Contingent Unliquidated **Phoenix** Δ7 85062-8045 Disputed State Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only □ Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts ☐ Check if this claim is for a community debt Other. Specify Credit Account Is the claim subject to offset? **☑** No ☐ Yes 4.14 \$6,721.89 City of Fort Worth Last 4 digits of account number <u>8 9 9 4</u> Nonpriority Creditor's Name When was the debt incurred? c/o Linebarger Goggan Blair & Sampson, As of the date you file, the claim is: Check all that apply. 100 Throckmorton Suite 300 ☐ Contingent Unliquidated 76102 Fort Worth TX □ Disputed City State ZIP Code Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only ☐ Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts ☐ Check if this claim is for a community debt Other. Specify Property Taxes Is the claim subject to offset? **☑** No Yes

Case number (if known)

Gomez

Alberto

Debtor 1

First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page After listing any entries on this page, number them sequentially from the **Total claim** previous page. 4.15 \$1,200.00 **Discount Tire** Last 4 digits of account number 9 7 1 9 Nonpriority Creditor's Name When was the debt incurred? PO Box 960061 As of the date you file, the claim is: Check all that apply. Number Contingent Unliquidated Orlando 32896-0061 Disputed City State ZIP Code Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only ☐ Student loans Debtor 2 only П Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts ☐ Check if this claim is for a community debt Other. Specify Credit Account Is the claim subject to offset? **☑** No ☐ Yes 4.16 \$950.00 Last 4 digits of account number **Firestone** 9 2 5 5 Nonpriority Creditor's Name When was the debt incurred? PO Box 81410 As of the date you file, the claim is: Check all that apply. Number Contingent Unliquidated Cleveland OH 44181-0410 Disputed City State Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only □ Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts ☐ Check if this claim is for a community debt Other. Specify Credit Account Is the claim subject to offset? **☑** No Yes 4.17 \$1,007.68 JC Penney Last 4 digits of account number 7 8 3 1 Nonpriority Creditor's Name When was the debt incurred? PO Box 960090 As of the date you file, the claim is: Check all that apply. ☐ Contingent Unliquidated 32896-0090 Orlando □ Disputed City State ZIP Code Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only ☐ Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts ☐ Check if this claim is for a community debt Other. Specify Credit Account Is the claim subject to offset? **☑** No Yes

Case number (if known)

Gomez

Alberto

Debtor 1

First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page After listing any entries on this page, number them sequentially from the **Total claim** previous page. \$486.00 Lakes of River Trails HOA Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO Box 185104 As of the date you file, the claim is: Check all that apply. Number Contingent Unliquidated **Fort Worth** TX 76181 П Disputed City State ZIP Code Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: ☐ Debtor 1 only ☐ Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts ☐ Check if this claim is for a community debt other. Specify Homeowners dues arrearage Is the claim subject to offset? ✓ No ☐ Yes 4.19 \$2,300.00 Last 4 digits of account number Macys 9 5 3 0 Nonpriority Creditor's Name When was the debt incurred? PO Box 8058 As of the date you file, the claim is: Check all that apply. Number Contingent Unliquidated OH 45040-8058 Mason Disputed City State Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only □ Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts ☐ Check if this claim is for a community debt Other. Specify Credit Account Is the claim subject to offset? **☑** No Yes 4.20 \$587.76 **New York & Company** Last 4 digits of account number 0 6 4 4 Nonpriority Creditor's Name When was the debt incurred? PO Box 659728 As of the date you file, the claim is: Check all that apply. ☐ Contingent Unliquidated San Antonio TX 78265-9728 □ Disputed City State ZIP Code Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only ☐ Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts ☐ Check if this claim is for a community debt Other. Specify Credit Account Is the claim subject to offset? **☑** No Yes

Case number (if known)

Gomez

Alberto

Debtor 1

First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page After listing any entries on this page, number them sequentially from the **Total claim** previous page. Unknown Shellpoint Mortgage Servicing Last 4 digits of account number 6 7 4 2 Nonpriority Creditor's Name When was the debt incurred? **Attn: Loss Mitigation Department** As of the date you file, the claim is: Check all that apply. PO Box 10826 Contingent Unliquidated 29603-0826 Greenville SC Disputed City State ZIP Code Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: ☐ Debtor 1 only ☐ Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts ☐ Check if this claim is for a community debt Other. Specify Deficiency balance on previously so Is the claim subject to offset? **☑** No ☐ Yes 4.22 \$6,300.00 **Slate Chase** Last 4 digits of account number 4 3 7 4 Nonpriority Creditor's Name When was the debt incurred? PO Box 94094-4014 As of the date you file, the claim is: Check all that apply. Street Contingent Unliquidated **Palatine** 60094-4014 Disputed City Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only □ Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts ☐ Check if this claim is for a community debt Other. Specify Credit Account Is the claim subject to offset? **☑** No Yes 4.23 \$5,106.72 Tarrant County Tax Collector Last 4 digits of account number <u>8 9 9 4</u> Nonpriority Creditor's Name When was the debt incurred? 100 E Weatherford St As of the date you file, the claim is: Check all that apply. ☐ Contingent Unliquidated 76196 Fort Worth TX Disputed City State ZIP Code Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only ☐ Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts ☐ Check if this claim is for a community debt Is the claim subject to offset? **☑** No Yes

Case number (if known)

Gomez

Alberto

Debtor 1

First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page After listing any entries on this page, number them sequentially from the **Total claim** previous page. \$6,834.86 Tarrant County Tax Collector Last 4 digits of account number 8 9 9 4 Nonpriority Creditor's Name When was the debt incurred? 100 E Weatherford St As of the date you file, the claim is: Check all that apply. Number Street Contingent Unliquidated **Fort Worth** 76196 TX П Disputed City State ZIP Code Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: ☐ Debtor 1 only ☐ Student loans Debtor 2 only П Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts ☐ Check if this claim is for a community debt Other. Specify 2014 property taxes Is the claim subject to offset? **☑** No ☐ Yes 4.25 \$744.10 **US Airways Visa** Last 4 digits of account number 3 9 2 7 Nonpriority Creditor's Name When was the debt incurred? PO Box 60517 As of the date you file, the claim is: Check all that apply. Number Contingent Unliquidated City of Industry CA 91716-0517 Disputed City Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only □ Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts ☐ Check if this claim is for a community debt Other. Specify Credit Account Is the claim subject to offset? **☑** No Yes 4.26 \$13,000.00 **USBank** Last 4 digits of account number <u>4</u> <u>5</u> <u>3</u> <u>5</u> Nonpriority Creditor's Name When was the debt incurred? PO Box 790408 As of the date you file, the claim is: Check all that apply. ☐ Contingent Unliquidated 63179-0408 St. Louis MO □ Disputed City State ZIP Code Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only ☐ Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts ☐ Check if this claim is for a community debt Other. Specify Credit Account Is the claim subject to offset? **☑** No Yes

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Alberto Gomez Debtor 1 Andres Case number (if known) First Name Middle Name Last Name Your NONPRIORITY Unsecured Claims -- Continuation Page Part 2: After listing any entries on this page, number them sequentially from the **Total claim** previous page. 4.27 \$5,300.00 Last 4 digits of account number Walmart 3 0 2 4 Nonpriority Creditor's Name When was the debt incurred? PO Box 960024 As of the date you file, the claim is: Check all that apply. Number Contingent Unliquidated Orlando 32896-0024 Disputed ZIP Code City State Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only ☐ Student loans Debtor 2 only П Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts ☐ Check if this claim is for a community debt Other. Specify Credit Account Is the claim subject to offset? **☑** No ☐ Yes 4.28 \$1,834.30 **Zales** Last 4 digits of account number 6 5 2 8 Nonpriority Creditor's Name When was the debt incurred? PO Box 183015 As of the date you file, the claim is: Check all that apply. Number Contingent Unliquidated Columbus OH 43218-3015 Disputed City State Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only ☐ Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts ☐ Check if this claim is for a community debt Other. Specify Credit Account Is the claim subject to offset? **☑** No Yes П

Debtor 1 Andres Alberto Gomez Case number (if known) ______

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

			Total claim
Total claims from Part 1	6a.	Domestic support obligations	6a. \$0.00
	6b.	Taxes and certain other debts you owe the government	6b. \$0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c. \$0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d. + \$0.00
	6e.	Total. Add lines 6a through 6d.	6d. \$0.00
			Total claim
Total claims 6f. Student loans from Part 2		Student loans	6f. \$0.00
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. \$0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h. \$0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	^{6i.} +\$94,279.48
	6j.	Total. Add lines 6f through 6i.	6j. \$94,279.48

Case 15-44971-mxm7 Doc 1 Filed 12/10/15 Entered 12/10/15 14:53:49 Page 35 of 79

Fill in this info				
Debtor 1	Andres	Alberto	Gomez	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court fo	or the: NORTHERN DIS	STRICT OF TEXA	<u>s</u>
Case number (if known)				☐ Check if this is an amended filing
Schedule G	Executor	y Contracts and	•	
Schedule G:	Executor	possible. If two married	l people are filing	ogether, both are equally responsible for supplying
chedule G: e as complete ar prect informatio	Executory nd accurate as p	possible. If two married	l people are filing dditional page, fill	ogether, both are equally responsible for supplying it out, number the entries, and attach it to this page.
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IL State **60197-4191** ZIP Code

Carol Stream

C	ase 1	.3-449/1-IIIX	III7 DOC I FIIEU I	Z/ 1U/ 1;	o Enten	eu 12	1/10/15 14.53	5.49 F	age 30 0	119
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ZIP Code

State

City

Case 15-44971-mxm7 Doc 1 Filed 12/10/15 Entered 12/10/15 14:53:49 Page 37 of 79 Alberto Gomez Debtor 1 Case number (if known) Middle Name First Name Last Name 3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2. Column 1: Your codebtor Column 2: The creditor to whom you owe the debt Check all schedules that apply: 3.1 Cynthia Gomez Schedule D, line 8963 River Falls Dr. 4.23 Schedule E/F, line Number Street ☐ Schedule G, line **Tarrant County Tax Collector** TX 76118 Fort Worth City ZIP Code Cynthia Gomez 3.2 Schedule D, line Name 8963 River Falls Dr. Schedule E/F, line Number Street ☐ Schedule G, line **Tarrant County Tax Collector** Fort Worth TX 76118 State 7IP Code Cynthia Gomez 3.3 ☐ Schedule D, line Name 8963 River Falls Dr. Schedule E/F, line Number Street ☐ Schedule G, line **Lakes of River Trails HOA** Fort Worth TX 76118 3.4 Cynthia Gomez Schedule D, line 8963 River Falls Dr. Schedule E/F, line Number Street ☐ Schedule G, line Bank of America Fort Worth TX 76118 State ZIP Code 3.5 **Cynthia Gomez** Schedule D, line Name 8963 River Falls Dr. ☐ Schedule E/F, line Street Number ☐ Schedule G, line Ally Loan

TX

State

TX

State

76118

76118

ZIP Code

ZIP Code

Schedule D, line

Schedule G, line

Schedule E/F, line

Linebarger, Goggan, Blair & Sampson

Fort Worth

Number

City

Fort Worth

3.6

Cynthia Gomez

8963 River Falls Dr.

Street

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Debtor 1 Andres Alberto Gomez
First Name Middle Name Last Name

Additional Page to List More Codebtors

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt Check all schedules that apply:

	Column 1: Your codebtor			Column 2: The creditor to whom you owe the debt
				Check all schedules that apply:
3.7	Cynthia Gomez Name			Schedule D, line
	8963 River Falls Dr. Number Street			Schedule E/F, line 4.14
				Schedule G, line
	Fort Worth City	TX State	76118 ZIP Code	City of Fort Worth
3.8	Cynthia Gomez Name			Schedule D, line
	8963 River Falls Dr. Number Street			Schedule E/F, line 4.21
				Schedule G, line
	Fort Worth	TX	76118	Shellpoint Mortgage Servicing
	City	State	ZIP Code	

Fill in this inform	nation to identify	y your case:			
Debtor 1	Andres	Alberto	Gomez		
	First Name	Middle Name	Last Name	Che	ck if this is:
Debtor 2				_	An amended filing
(Spouse, if filing)	First Name	Middle Name	Last Name		7 iii amenasa ming
United States Bankruptcy Court for the:		NORTHERN DISTRICT OF TEXAS		🗆	A supplement showing postpetition chapter 13 income as of the following date:
Case number					
(if known)					MM / DD / YYYY

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1.	Fill in your employment information.		Debtor 1		Debtor 2 or non-	filing spouse
	If you have more than one job, attach a separate page with information about additional employers.	Employment status	✓ Employed✓ Not employed		☐ Employed✓ Not employed	•
auu	additional employers.	Occupation	Sr. Crew Analyst		_	
	Include part-time, seasonal, or self-employed work.	Employer's name	American Airlines	S	_	
student c	Occupation may include	- Employer 5 address		r Blvd.		
	student or homemaker, if it		Number Street			
	applies.		Fort Worth, Texas	761551		
			City	State Zip Code	City	State Zip Code
		How long employed to	here? <u>18 years</u>			

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

			For Debtor 1	For Debtor 2 or non-filing spouse
2.	List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2.	\$6,323.94	\$0.00
3.	Estimate and list monthly overtime pay.	3.	+\$0.00	\$0.00
4.	Calculate gross income. Add line 2 + line 3.	4.	\$6,323.94	\$0.00

Official Form 106l Schedule I: Your Income page 1

Alberto Gomez Debtor 1 Andres Case number (if known) Middle Name First Name Last Name For Debtor 1 For Debtor 2 or non-filing spouse Copy line 4 here \$6,323.94 \$0.00 List all payroll deductions: \$0.00 \$1,318.25 5a. Tax, Medicare, and Social Security deductions 5a. 5b. Mandatory contributions for retirement plans \$0.00 \$0.00 5b. \$373.77 \$0.00 5c. Voluntary contributions for retirement plans 5c \$0.00 \$0.00 5d. Required repayments of retirement fund loans 5d. \$176.02 \$0.00 5e 5e. Insurance \$0.00 \$0.00 **Domestic support obligations** 5f. 5g. Union dues 5g. \$0.00 \$0.00 5h. Other deductions. 5h.+ \$199.24 \$0.00 Specify: See continuation sheet Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 6. \$2,067.28 \$0.00 5g + 5h. 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. \$4,256.66 \$0.00 List all other income regularly received: 8a. Net income from rental property and from operating a \$0.00 \$0.00 business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8b \$0.00 \$0.00 8c. Family support payments that you, a non-filing spouse, or a 8c \$0.00 \$0.00 dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8d. \$0.00 \$0.00 8e. Social Security 8e. \$0.00 \$0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) or any noncash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. \$0.00 \$0.00 8g. Pension or retirement income 8g. \$0.00 \$0.00 8h. Other monthly income. 8h. д Specify: Ave. monthly contribution from Mother \$100.00 \$0.00 Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h. 9. \$100.00 \$0.00 10. Calculate monthly income. Add line 7 + line 9. \$4,356.66 \$4,356.66 \$0.00 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. \$0.00 Specify: 11. 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly 12. \$4,356.66 income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information,

Official Form 106l Schedule I: Your Income page 2

if it applies.

Combined

monthly income

Case 15-44971-mxm7 Doc 1 Filed 12/10/15 Entered 12/10/15 14:53:49 Page 41 of 79 Debtor 1 Andres Alberto Gomez Case number (if known) First Name Middle Name Last Name 13. Do you expect an increase or decrease within the year after you file this form? No. None. Yes. Explain:

Official Form 106l Schedule I: Your Income page 3

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Deb			Gomez		Case number (if known)		
	First Name	Middle Name	Last Name				
5h.	Other Payroll Deduct	tions (details)			For Debtor 1	For Debtor 2 or non-filing spouse	
	Disability			_	\$1.08	<u>\$0.00</u>	
	Life Insurance			_	\$13.67	\$0.00	
	group legal plan			_	\$18.98	<u>\$0.00</u>	
	Auto & home insur	ance		_	\$165.51	<u>\$0.00</u>	
			To	otals:	\$199.24	\$0.00	

Official Form 106I Schedule I: Your Income page 4

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Fill	in this inform	nation to ide	entify your case:			Check if th	ie ie:	
De	ebtor 1	Andres	Alberto	Gom			nended filing	
		First Name	Middle Name	Last N	ame	A sup	plement showing	
	ebtor 2 pouse, if filing)	First Name	Middle Name	Last N	ame		er 13 expenses a ring date:	s or the
	nited States Bankr						DD //000/	
	ase number	uptoy Court for	uio. <u>Itorrinerro</u>	<u> </u>	1 12///0	IMINI /	DD / YYYY	
	known)							
Offic	cial Form 10	6.1						
	nedule J: Yo		SAS					12/15
		-						
			sible. If two married po s needed, attach anothe	-				
name	and case number	er (if known).	Answer every question					
Par	rt 1: Descri	be Your Ho	usehold					
	s this a joint case							
	_							
! 1	✓ No. Go to line ✓ Yes. Does D		a separate household?	,				
	No							
	☐ Yes	s. Debtor 2 mus	st file Official Form 106J	-2, Expense	es for Separate Hou	usehold of Debto	or 2.	
2. [Do you have depe	endents?	□ No		Dependent's re	lationship to	Dependent's	Does dependent
	Do not list Debtor	1 and	Yes. Fill out this interpretation for each dependent		Dobtor 1 or Dol		age	live with you?
[Debtor 2.		•		Daughter		13	□ No - ▽ Yes
	Do not state the de	ependents'			Mathan			✓ res
r	names.				Mother		_	Yes
							_	□ No - □ Yes
								□ No
							_	Yes
								□ No - □ Yes
3. [Do your expenses	s include	√ No					
e	expenses of peop	le other than	☐ Yes					
)	yourself and your	dependents?						
Par	rt 2: Estima	te Your On	going Monthly Exp	enses				
Estim	nate your expense	es as of your b	oankruptcy filing date u	nless you	are using this forn	n as a suppleme	ent in a Chapter	13 case
•	oort expenses as orm and fill in the		the bankruptcy is filed	. If this is	a supplemental So	chedule J, chec	k the box at the t	op of
		• •	cash government assis	tance if vo	u know the value	of		
			it on Schedule I: Your II	-			Your expens	ses
			expenses for your residence and any rent for the ground				4.	\$363.38
ŀ	f not included in	line 4:						
4	4a. Real estate ta	axes					4a	\$119.31
4	4b. Property, hom	neowner's, or re	enter's insurance				4b	\$389.00
4	4c. Home mainte	nance, repair, a	and upkeep expenses				4c.	\$50.00
,		•	condominium dues				4d.	\$18.08

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Debtor 1 Andres Alberto Gomez Case number (if known)
First Name Middle Name Last Name

		Your exper	ises
5.	Additional mortgage payments for your residence, such as home equity loans	5	
6.	Utilities:		
	6a. Electricity, heat, natural gas	6a	\$140.00
	6b. Water, sewer, garbage collection	6b	\$50.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c	\$165.00
	6d. Other. Specify: Cell Phone	6d.	\$250.00
7.	Food and housekeeping supplies	7.	\$875.00
8.	Childcare and children's education costs	8.	
9.	Clothing, laundry, and dry cleaning	9.	\$70.00
10.	Personal care products and services	10.	\$50.00
11.	Medical and dental expenses	11.	\$90.00
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$500.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$100.00
14.	Charitable contributions and religious donations	14	
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a	
	15b. Health insurance	15b	
	15c. Vehicle insurance	15c	
	15d. Other insurance. Specify:	15d	
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	
17.	Installment or lease payments:		
	17a. Car payments for Vehicle 1	17a	
	17b. Car payments for Vehicle 2	17b	
	17c. Other. Specify:	17c	
	17d. Other. Specify:	17d	
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$600.00
	child support		
19.	Other payments you make to support others who do not live with you. Specify: Non-Filing Spouse in Argentina	19.	\$500.00
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.		
	20a. Mortgages on other property	20a	
	20b. Real estate taxes	20b	
	20c. Property, homeowner's, or renter's insurance	20c	
	20d. Maintenance, repair, and upkeep expenses	20d	
	20e. Homeowner's association or condominium dues	20e.	

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Deb		Andres	Alberto	Gomez	Case number (if kr	nown)		
		First Name	Middle Name	Last Name				
21.	Othe	er. Specify:			21.	+		
22.	Calc	ulate your month	ly expenses.					
	22a.	Add lines 4 thro	ugh 21.		228	\$4,329.77		
	22b.	Copy line 22 (m	onthly expenses for Debto	or 2), if any, from Official For	m 106J-2. 22b).		
	22c.	Add line 22a an	d 22b. The result is your	monthly expenses.	220	\$4,329.77		
23.	Calc	ulate your month	nly net income.					
	23a.	Copy line 12 (yo	our combined monthly inco	ome) from Schedule I.	23a	\$4,356.66		
	23b.	Copy your mont	hly expenses from line 22	c above.	23b	\$4,329.77		
	23c.	23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income. 23c.						
24.	Do y	ou expect an inc	rease or decrease in you	ır expenses within the yea	r after you file this form?			
	For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?							
		No						
		Yes. Explain here Discretion		adjusted based on inco	me			

D 1	Al	Alleanta	0		
Debtor 1	Andres First Name	Alberto Middle Name	Gomez Last Name	-	
Debtor 2					
Spouse, if filing)	First Name	Middle Name	Last Name	-	
Inited States Ba	nkruptov Court fo	or that NODTHEDN C	DISTRICT OF TEXAS		
	Tikrupicy Court it	or the. NORTHLAND	DISTRICT OF TEXAS	-	
Case number if known)				☐ Check if t	
				amended	Tiling
official Form	106Sum				
ummary of	Your Ass	ets and I iabilit	ties and Certain Sta	tistical Information	12 <i>/</i>
				, both are equally responsible for	
		=		on on this form. If you are filing a check the box at the top of this pa	
nedules after yo	ou life your orig	iliai ioriiis, you iliust i	illi out a new Summary and t	meck the box at the top of this pa	ige.
2011/2					
Part 1: Su	mmarize Υοι	Ir Assets			
				Υ	our assets
				V	/alue of what you owr
Schedule A/B	3: Property (Offici	al Form 106A/B)			
1a. Copy line	e 55, Total real e	state, from Schedule A	/B		\$54,600.0
					#400 444 4 2
1b. Copy line	e 62, Total perso	nal property, from Sche	edule A/B		\$136,144.1
					£400.744.41
1c. Copy line	e 63, Total of all	property on Schedule A	\/B		\$190,744.17
Part 2: Su	mmarize Υοι	ır Liabilities			
					Your liabilities
					Amount you owe
Schedule D: (Creditors Who H	ave Claims Secured by	Property (Official Form 106D)	1	
				st page of Part 1 of Schedule D	\$71,284.90
Schedule E/F	: Creditors Who	Have Unsecured Claim	s (Official Form 106E/F)		
				hedule E/F	\$0.00
3b. Copy the	total claims fron	n Part 2 (nonpriority un	secured claims) from line 6j of	Schedule E/F+	\$94,279.48
				F	
				Your total liabilities	\$165,564.38
				L	
Part 3: Su	mmarize Υοι	ır Income and Exp	penses		
	mmarize You	-	penses		

Schedule J: Your Expenses (Official Form 106J)

\$4,329.77

Case 15-44971-mxm7 Doc 1 Filed 12/10/15 Entered 12/10/15 14:53:49 Page 47 of 79 **Andres Alberto** Gomez Debtor 1 Case number (if known) Middle Name First Name Last Name Part 4: **Answer These Questions for Administrative and Statistical Records** Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. $\overline{\mathbf{A}}$ Yes What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. From the Statement of Your Current Monthly Income: Copy your total current monthly income from \$5,741.37 Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

Total claim

From Part 4 on *Schedule E/F.* copy the following:

110	in rait 4 on ochedule L/r, copy the following.	
9a.	Domestic support obligations. (Copy line 6a.)	\$0.00
9b.	Taxes and certain other debts you owe the government. (Copy line 6b.)	\$0.00
9c.	Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00
9d.	Student loans. (Copy line 6f.)	\$0.00
9e.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$0.00
9f.	Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$0.00
9g.	Total. Add lines 9a through 9f.	\$0.00

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First Name Middle Name Last Name Debtor 2 Debtor 2 Debtor 2 Debtor 3 Debtor 4 Debtor 5 Debtor 5 Debtor 6 Debtor 7 Debtor 7 Debtor 8 Debtor 9 Debto	Fill in this info	ormation to i	dentify your case	:	
Spouse, if filing) First Name Middle Name Last Name Inited States Bankruptcy Court for the: NORTHERN DISTRICT OF TEXAS	Debtor 1				
	Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
ase number	United States Ban	kruptcy Court for	r the: NORTHERN D	ISTRICT OF TE	XAS
f known)	Case number (if known)				_

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is NOT	an attorney to help you fill out bankruptcy forms?
V No	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
Under penalty of perjury, I declare that I have read true and correct.	the summary and schedules filed with this declaration and that they are
X /s/ Andres Alberto Gomez Signature of Debtor 1	X Signature of Debtor 2
Date <u>12/10/2015</u> MM / DD / YYYY	Date MM / DD / YYYY

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Ouse 1	10 44071 IIIXI	IIII DOO I I IICA	12/10/10	Entered 12/10/10 14:00	5.45 Tage 45 6175
Fill in this	information to i	identify your case	e:		
Debtor 1	Andres	Alberto	Gomez		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing	ng) First Name	Middle Name	Last Name		
United States	Bankruptcy Court fo	or the: NORTHERN I	DISTRICT OF T	EXAS	
Case number (if known)				_	Check if this is an
					amended filing
Statement	of Financia	Affairs for Inc	dividuals Fi	ling for Bankruptcy	12/
	•	nown). Answer every		nere You Lived Before	
	our current marital d				
☑ No		you lived anywhere you lived in the last 3		you live now? ude where you live now.	
Debtor	1:		ates Debtor 1 red there	Debtor 2:	Dates Debtor 2 lived there
(Communit	•	•	• •	uivalent in a community property Idaho, Louisiana, Nevada, New M	•

☐ Yes. Make sure you fill out *Schedule H: Your Codebtors* (Official Form 106H).

ebioi i	Allaico	AIDOITO	00111		
	First Name	Middle Name	Last Na		

Explain the Sources of Your Income

Part 2:

4.	Did you have any income from employn Fill in the total amount of income you rece If you are filing a joint case and you have	ived from all jobs and all bus	inesses, including par	t-time activities.	endar years?
	☐ No ☑ Yes. Fill in the details.				
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions	Sources of income Check all that apply.	Gross income (before deductions and exclusions
	m January 1 of the current year until date you filed for bankruptcy:	✓ Wages, commissions, bonuses, tips	\$67,856.04	Wages, commissions, bonuses, tips	
	,	Operating a business		Operating a business	
	the last calendar year:	✓ Wages, commissions, bonuses, tips	\$65,325.00	Wages, commissions, bonuses, tips	
(Jai	nuary 1 to December 31, 2014)	Operating a business		Operating a business	
	the calendar year before that:	Wages, commissions, bonuses, tips	\$55,485.00	Wages, commissions, bonuses, tips	
(Ja	nuary 1 to December 31, 2013)	☐ Operating a business		Operating a business	
	and gambling and lottery winnings. If you Debtor 1. List each source and the gross income fro No Yes. Fill in the details.		·		once under
		Debtor 1		Debtor 2	
		Sources of income Describe below.	Gross income from each source (before deductions and exclusions	Sources of income Describe below.	Gross income from each source (before deductions and exclusions
	m January 1 of the current year until date you filed for bankruptcy:				
	and you mon to manuaproy.				
	the last calendar year: nuary 1 to December 31, 2014)	tax refund	\$555.00 		
	the calendar year before that: nuary 1 to December 31, 2013)	tax refund	\$119.00		
, υ αι	YYYY				

Case 15-44971-mxm7 Doc 1 Filed 12/10/15 Entered 12/10/15 14:53:49 Page 51 of 79 **Andres** Alberto Gomez Debtor 1 Case number (if known) Middle Name Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,225* or more? ☐ No. Go to line 7. Tyes. List below each creditor to whom you paid a total of \$6,225* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? ☐ No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Amount you Dates of Total amount Was this payment for... payment paid stil owe 09/01/2015 ✓ Mortgage American Airlines Federal Credit Union \$1,090.14 \$54,000.00 Creditor's name 10/01/2015 Car PO Box 619001 11/01/2015 Credit card Number Loan repayment MD2100 Suppliers or vendors **DFW Airport** 75261-9001 TX Other City ZIP Code Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? *Insiders* include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations such as child support and alimony. **☑** No Yes. List all payments to an insider. Dates of **Total amount** Amount you Reason for this payment still owe payment paid

	Cas	se 15-4497 <i>î</i>	1-mxm7	Doc 1	Filed 12/10/15	- Ente	red 12	2/10/15 14	:53:49) Page	e 52 o	f 79
Deb	otor 1	Andres		erto	Gomez		_ Ca	ase number (if k	nown) _			
		First Name	Midd	lle Name	Last Name							
8.		n 1 year before y fited an insider?	ou filed fo	r bankrupto	cy, did you make an	y payment	s or tran	nsfer any prope	erty on a	ccount of a	a debt th	at
	Includ	de payments on d	ebts guarar	nteed or cos	signed by an insider.							
	□ N	lo ′es. List all paym	ents that be	enefited an i	insider.							
					Dates of payment	Total amo paid	unt	Amount you still owe		ason for th		
	nthia C	Gomez			09/01/2015	\$1,800	0.00		ch	ild suppo	rt	
896	3 Rive	er Falls Dr.			10/01/2015							
Num	iber S	Street			11/01/2015							
For	t Wort	th	TX	76118								
City			State	ZIP Code								
P	art 4:	Identify Le	egal Actio	ons. Rep	ossessions, and	l Foreclo	sures					
9.					•			urt action or a	dminist	otivo proc	ooding?	
э.	List al	II such matters, in	cluding per	sonal injury	cy, were you a party cases, small claims							custody
	modifi	ications, and con	tract dispute	es.								
	\square N	lo.										
			oilo									
		es. Fill in the det	ails.									
	☑ Y		ails.	Nature of				or agency			Status of	f the case
	You	es. Fill in the det		City of Fe	ort Worth, et al vs		342nd	Judicial Dist	rict Co		Status of	
	You			City of Fo		(342nd Court Na	Judicial Dist				
	You	es. Fill in the det		City of Fo	ort Worth, et al vs et al; property tax n: 8963 River Fall	(342nd Court Na	Judicial Dist ame nt County, Te				Pending On appeal
City	e title	es. Fill in the det	vs.	City of Fo	ort Worth, et al vs et al; property tax n: 8963 River Fall	(342nd Court Na Tarrar	Judicial Dist				Pending
City	e title	es. Fill in the det	vs.	City of Fo	ort Worth, et al vs et al; property tax n: 8963 River Fall	(342nd Court Na Tarrar	Judicial Dist				Pending On appeal
Cas	ee title y of Fo	res. Fill in the det ort Worth et all	vs. 1-15	City of Fo Gomez, e collection Fort Wor	ort Worth, et al vs et al; property tax n: 8963 River Fall	s Dr.,	342nd Court Na Tarrar Number City	Judicial Dist ame nt County, Te Street	State	ZIP Code	— Ø	Pending On appeal
Cas	ee title y of Fo	res. Fill in the det port Worth et all ber 342-D0615 n 1 year before y d, or levied?	vs. 1-15 /ou filed fo	City of Fo Gomez, e collection Fort Wor	ort Worth, et al vs et al; property tax n: 8963 River Fall th	s Dr.,	342nd Court Na Tarrar Number City	Judicial Dist ame nt County, Te Street	State	ZIP Code	— Ø	Pending On appeal
Cas	ee title y of Fo se numb Withir seized Check	ort Worth et all ber 342-D0615 n 1 year before y d, or levied? k all that apply an	vs. 1-15 /ou filed fo	City of Fo Gomez, e collection Fort Wor	ort Worth, et al vs et al; property tax n: 8963 River Fall th	s Dr.,	342nd Court Na Tarrar Number City	Judicial Dist ame nt County, Te Street	State	ZIP Code	— Ø	Pending On appeal
Cas	se title y of Fo se numb Within seize Check	ort Worth et all ber 342-D0615 n 1 year before y d, or levied? k all that apply an	vs. 1-15 /ou filed for	City of Fo Gomez, e collection Fort Wor	ort Worth, et al vs et al; property tax n: 8963 River Fall th	s Dr.,	342nd Court Na Tarrar Number City	Judicial Dist ame nt County, Te Street	State	ZIP Code	— Ø	Pending On appeal
Cass	within seizer Check	ber 342-D0615 n 1 year before y d, or levied? k all that apply an lo. Go to line 11. es. Fill in the info	vs. 1-15 you filed for the commation be	City of Fo Gomez, e collection Fort Wor	ort Worth, et al vs et al; property tax n: 8963 River Fall th	s Dr., property re	342nd Court Na Tarrar Number City	Judicial Dist	State	ZIP Code	— ☑ — □ — □	Pending On appeal
Cass	within seizer Check	ber 342-D0615 n 1 year before y d, or levied? k all that apply an lo. Go to line 11. es. Fill in the info	vs. 1-15 you filed for the commation be a you filed f	City of Fo Gomez, e collection Fort Wor r bankrupte details below	ort Worth, et al vs et al; property tax n: 8963 River Fall th cy, was any of your	s Dr., property re	342nd Court Na Tarrar Number City	Judicial Dist	State	ZIP Code	— ☑ — □ — □	Pending On appeal
Cass	within seized Check Within amou	ber 342-D0615 n 1 year before y d, or levied? k all that apply an lo. Go to line 11. es. Fill in the info	vs. 1-15 ou filed for the commation be expourted from the counts or	City of Fo Gomez, e collection Fort Wor r bankrupte details below	ort Worth, et al vs et al; property tax n: 8963 River Fall tth cy, was any of your w.	s Dr., property re	342nd Court Na Tarrar Number City	Judicial Dist	State	ZIP Code	— ☑ — □ — □	Pending On appeal
City Cass 10.	within amou	res. Fill in the det ber 342-D0615 In 1 year before y d, or levied? k all that apply and lo. Go to line 11. res. Fill in the info In 90 days before unts from your act	vs. 1-15 You filed for the commation be expourable or the counts or ails.	City of Fo Gomez, e collection Fort Wor r bankrupte details below low. for bankrup refuse to n	ort Worth, et al vs et al; property tax n: 8963 River Fall tth cy, was any of your w.	s Dr., property re	342nd Court Na Tarrar Number City eposses	Judicial Distance and County, Telester Street seed, foreclose corfinancial indebt?	State d, garnis	ZIP Code shed, attac	hed,	Pending On appeal Concluded
City Cass 10.	within amou	res. Fill in the det ber 342-D0615 In 1 year before y d, or levied? k all that apply and lo. Go to line 11. res. Fill in the info In 90 days before unts from your act	vs. 1-15 You filed for the commation be expourable or the counts or ails.	City of Fo Gomez, e collection Fort Wor r bankrupte details below low. for bankrup refuse to n	ort Worth, et al vs et al; property tax n: 8963 River Fall th cy, was any of your w. otcy, did any credito nake a payment bec	s Dr., property re	342nd Court Na Tarrar Number City eposses	Judicial Distance and County, Telester Street seed, foreclose corfinancial indebt?	State d, garnis	ZIP Code shed, attac	hed,	Pending On appeal Concluded
City Cas 10.	within amou	ber 342-D0615 n 1 year before y d, or levied? k all that apply an lo. Go to line 11. es. Fill in the info n 90 days before ints from your ac	vs. 1-15 You filed for the commation be expourable or the counts or ails.	City of Fo Gomez, e collection Fort Wor r bankrupte details below low. for bankrup refuse to n	ort Worth, et al vs et al; property tax n: 8963 River Fall th cy, was any of your w. otcy, did any credito nake a payment bec	s Dr., property re	342nd Court Na Tarrar Number City eposses	Judicial Distance and County, Telester Street seed, foreclose corfinancial indebt?	State d, garnis	ZIP Code shed, attac	hed,	Pending On appeal Concluded

Case 15-44971-mxm7 Doc 1 Filed 12/10/15 Entered 12/10/15 14:53:49 Page 53 of 79 **Andres Alberto** Gomez Debtor 1 Case number (if known) First Name Middle Name Last Name Part 5: **List Certain Gifts and Contributions** 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value per person the gifts monthly supplement income for day to day living expenses; approximatley \$200.00 per **Haydee Gomez** Person to Whom You Gave the Gift 644 Timberline Dr. Number Street TX 76053 Hurst City State ZIP Code Person's relationship to you Mother 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? ☐ No ightharpoonup Yes. Fill in the details for each gift or contribution. Value Gifts or contributions to charities Describe what you contributed Date you contributed that total more than \$600 clothing, HHG annual donation **Goodwill Store** Charity's Name 825 West Pipeline Number Street TX 76053 Hurst City ZIP Code State Part 6: **List Certain Losses** 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? **☑** No Yes. Fill in the details.

Case 15-44971-mxm7 Doc 1 Filed 12/10/15 Entered 12/10/15 14:53:49 Page 54 of 79 **Andres Alberto** Gomez Debtor 1 Case number (if known) First Name Middle Name Last Name Part 7: **List Certain Payments or Transfers** 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required for your bankruptcy. Yes. Fill in the details. Description and value of any property transferred Date payment Amount of or transfer was payment Access Counseling, Inc. made Person Who Was Paid 10/26/2015 \$40.00 Number Street City State ZIP Code Email or website address Person Who Made the Payment, if Not You Description and value of any property transferred Date payment Amount of or transfer was payment The Vida Law Firm, PLLC made Person Who Was Paid 3000 Central Drive 07/31/2015 \$500.00 Number Street 10/08/2015 \$1,500.00 **Bedford** TX 76021 City State ZIP Code Email or website address Person Who Made the Payment, if Not You 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. **⋈** No Yes. Fill in the details.

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Deb	otor 1 Andres Alberto		Case number (if	known)	
	First Name Middle Na	me Last Name			
8.	Within 2 years before you filed for be property transferred in the ordinary			roperty to anyone, o	ther than
	Include both outright transfers and tran Do not include gifts and transfers that			t or mortgage on you	r property).
	✓ No✓ Yes. Fill in the details.				
9.	Within 10 years before you filed for I you are a beneficiary? (These are			trust or similar devi	ice of which
	✓ No☐ Yes. Fill in the details.				
P	art 8: List Certain Financial	Accounts, Instruments, S	afe Deposit Boxes, ar	nd Storage Units	1
20.	Within 1 year before you filed for bar benefit, closed, sold, moved, or tran		counts or instruments held	l in your name, or fo	or your
	Include checking, savings, money mar houses, pension funds, cooperatives,		•	s in banks, credit unio	ns, brokerage
	No✓ Yes. Fill in the details.				
		Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
	nerican Airlines				
					
	ne of Financial Institution	xxxx	Checking		\$17.00
Nam		xxxx	Savings Money market Brokerage		\$17.00
Nam	ne of Financial Institution		Savings Money market		\$17.00
Num	ne of Financial Institution	ithin 1 year before you filed for	Savings Money market Brokerage Other	osit box or other dep	
Num	ne of Financial Institution nber Street State ZIP Coo Do you now have, or did you have w	ithin 1 year before you filed for	Savings Money market Brokerage Other	osit box or other dep	

	Case	e 15-44971	-mxm7 Doc 1 F	Filed 12/10/15	Entered 12/10/15 14:53:49	Page 56 of 79
Deb	otor 1	Andres	Alberto	Gomez	Case number (if known)	
		First Name	Middle Name	Last Name		
P	art 9:	Identify Pro	perty You Hold	or Control for So	meone Else	
23.		hold or control in trust for som		meone else owns? I	nclude any property you borrowed from, a	are storing for,
	✓ No ☐ Yes	s. Fill in the detai	ils.			
P	art 10:	Give Detail	s About Environ	mental Informatio	on	
For	the purp	ose of Part 10,	the following definiti	ons apply:		
- 1	hazardoı	us or toxic subs	tance, wastes, or ma	terial into the air, lan	gulation concerning pollution, contaminat d, soil, surface water, groundwater, or oth substances, wastes, or material.	
		-		as defined under any including disposal s	y environmental law, whether you now ow ites.	n, operate, or
				onmental law defines ntaminant, or similar	s as a hazardous waste, hazardous substa item.	ance, toxic
Rep	ort all n	otices, releases	, and proceedings th	at you know about, re	egardless of when they occurred.	
24.	Has an law?	y governmental	unit notified you tha	t you may be liable o	r potentially liable under or in violation of	an environmental
	☑ No					
	☐ Yes	s. Fill in the detai	ils.			
25.	-	ou notified any o	governmental unit of	any release of hazar	dous material?	
	✓ No ☐ Yes	. Fill in the detai	ils.			
26.	Have you		in any judicial or adı	ministrative proceedi	ng under any environmental law? Include	settlements and
	☑ No	—				
	☐ Yes	s. Fill in the detai	IIS.			
Р	art 11:	Give Detail	s About Your Bu	siness or Connec	ctions to Any Business	
27.	Within busine	•	ou filed for bankrupt	cy, did you own a bu	siness or have any of the following conne	ctions to any
		A member of a A partner in a p An officer, direct An owner of at	limited liability compa partnership ctor, or managing exe	ny (LLC) or limited liab cutive of a corporation or equity securities of		
			• • •	the details below for e	each business.	

Ca	se 15-44971-	mxm7 Doc 1 Fil	ed 12/10/15	Entered	12/10/15 14:53:49	Page 57 of 79
Debtor 1	Andres	Alberto	Gomez		Case number (if known)	•
	First Name	Middle Name	Last Name		,	
all fir		creditors, or other pa		ancial statem	ent to anyone about your bu	siness? Include
Part 12	Sign Below					
that answ property l or both.	vers are true and co by fraud in connect 18 U.S.C. §§ 152, 13	rrect. I understand th ion with a bankruptcy 41, 1519, and 3571.	at making a false s	tatement, co	s, and I declare under penali ncealing property, or obtaini 250,000, or imprisonment for	ng money or
	dres Alberto Gomure of Debtor 1	lez	Signature of	Debtor 2		
Date	12/10/2015		Date			
Did you a	ttach additional paç	jes to Your Statement	of Financial Affair	s for Individu	als Filing for Bankruptcy (Of	ficial Form 107)?
✓ No ☐ Yes						
Did you p	ay or agree to pay	someone who is not a	n attorney to help	you fill out ba	inkruptcy forms?	
☑ No						
☐ Yes.	Name of person				, ,	Petition Preparer's Notice, ture (Official Form 119).

Fill in this information to identify your case:					
Debtor 1	Andres	Alberto	Gomez		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Ba	nkruptcy Court fo	or the: NORTHERN D	ISTRICT OF TEXAS		
Case number					
(if known)					

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Hold Secured Claims

1.	For any creditors that you listed in Part 1 of Schedule D: Creditors Who Hold Claims Secured by Property (Official Form 106D),	,
	fill in the information below.	

Identify the creditor and the property that is collateral			at do you intend to do with the perty that secures a debt?	Did you claim the property as exempt on Schedule C?		
Creditor's name:	Ally Loan		Surrender the property. Retain the property and redeem it.		No Yes	
Description of property securing debt:	2012 Ford Mustang		Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:			
Creditor's name:	American Airlines Federal Credit Union		Surrender the property. Retain the property and redeem it.		No Yes	
Description of property securing debt:	644 Timberline Dr., Hurst, Texas		Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:			

Alberto Gomez Debtor 1 Case number (if known) First Name Middle Name Last Name Part 2: **List Your Unexpired Personal Property Leases** For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2). Describe your unexpired personal property leases Will this lease be assumed? Lessor's name: **Sprint** Description of leased cell phone Yes $\mathbf{\Lambda}$ property: Part 3: Sign Below Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and personal property that is subject to an unexpired lease. X /s/ Andres Alberto Gomez Signature of Debtor 2 Signature of Debtor 1 Date 12/10/2015 Date

MM / DD / YYYY

MM / DD / YYYY

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF TEXAS FORT WORTH DIVISION

IN RE: Andres Alberto Gomez CASE NO

CHAPTER 7

DISCLOSURE OF COMPENSATION UNDER 11 U.S.C. § 329 AND B.R. 2016(B)

Amount paid: \$2,000.00

Amount to be paid: \$0.00

Property transferred to attorney: None

Collateral held by attorney: None

Source of compensation: Current wages

I certify that I am the attorney for the above named debtor, and that the compensation paid or agreed to be paid to me for services rendered or to be rendered on behalf of the Debtor in or in connections with a case under Title 11 of the United States Code, such payment or agreement having been made after one year before the date of filing of the petition, is as indicated above.

I further certify that the Debtor has been informed and has agreed that the compensation paid shall include the following legal services: (a) All conferences with the Debtor; (b) Preparation of Petition and Schedules; (c) Attendance at 341 First Meeting and attendance at reaffirmation and/or confirmation hearings; (d) Preparation of routine motions.

I have not agreed to share this compensation with any person other than members of the firm.

Date 12/10/2015

/s/ Carla R. Vida

Carla R. Vida Bar No. 16674445

The Vida Law Firm, PLLC 3000 Central Drive Bedford, TX 76021

Phone: (817) 358-9977 / Fax: (817) 358-9988

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UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF TEXAS FORT WORTH DIVISION

IN RE: Andres Alberto Gomez CASE NO

CHAPTER 7

VERIFICATION OF CREDITOR MATRIX

	The above named Debtor hereby	verifies that the a	attached list of cre	editors is true and o	correct to the best	of his/her
know	ledge.					

Date	Signature _/s/ Andres Alberto Gomez Andres Alberto Gomez
Date	Signature

Ally Loan PO Box 380902 Bloomington, MN 55438

American Airlines FCU PO Box 619001 MD2100 DFW Airport, Texas 75261-9001

American Airlines Federal Credit Union PO Box 619001 MD2100 DFW Airport, Texas 75261-9001

American Express PO Box 650468 Dallas, Texas 75265-0448

Banana Republic PO Box 530942 Atlanta, GA 30353-0942

Bank of America PO Box 5170 Simi Valley, CA 93062-5170

Barclay's Bank/ Juniper 125 S. West St. Wilmington, DE 19801

Best Buy PO Box 78009 Phoenix, AZ 85062-8009

Capital One PO Box 60599 City of Industry, CA 91716-0599 Chase PO Box 15123 Wilmington, DE 19850-5123

Citi PO Box 78045 Phoenix, AZ 85062-8045

Citibank PO Box 78045 Phoenix, AZ 85062-8045

City of Fort Worth c/o Linebarger Goggan Blair & Sampson, 100 Throckmorton Suite 300 Fort Worth, Texas 76102

Codilis & Stawiarski 650 N. Sam Houston Parkway East Suite 450 Houston, Texas 77060

Comentiy PO Box 182273 Columbus, OH 63218-2273

Credit First Bk-6/Credit Operation Cleveland, OH 44181-0410

Cynthia Gomez 8963 River Falls Dr. Fort Worth, Texas 76118

Discount Tire PO Box 960061 Orlando, FL 32896-0061 Firestone PO Box 81410 Cleveland, OH 44181-0410

First Source PO Box 628 Buffalo, NY 14240-0628

GC Services Limited Partnership PO Box 1389 Copperas Cove, Texas 76522-5389

Internal Revenue Service Center PO Box 7346 Philadelphia, PA 19101-7346

JC Penney PO Box 960090 Orlando, Fl 32896-0090

Lakes of River Trails HOA PO Box 185104 Fort Worth, Texas 76181

Linebarger, Goggan, Blair & Sampson Bankruptcy Dept. 100 Throckmorton Fort Worth, Texas 76102

Macys PO Box 8058 Mason, Ohio 45040-8058

New York & Company PO Box 659728 San Antonio, Texas 78265-9728 Phillips & Cohen Associates MD 661 1002 Justison Street Wilmington, DE 19801-5148

Shellpoint Mortgage Servicing Attn: Loss Mitigation Department PO Box 10826 MS:15 Greenville, SC 29603-0826

Slate Chase PO Box 94094-4014 Palatine, IL 60094-4014

Snychrony Bank PO Box 9650047 Orlando, FL 32896-5004

Sprint PO Box 4191 Carol Stream, IL 60197-4191

Synchrony Bank PO Box 965022 Orlando, FL 32896-5022

Tarrant County Tax Collector 100 E Weatherford St Fort Worth, TX 76196

United Collection Bureau 5620 Southwyck Blvd, Ste 206 Toledo, OH 43614

US Airways Visa PO Box 60517 City of Industry, CA 91716-0517 USBank PO Box 790408 St. Louis, MO 63179-0408

Walmart PO Box 960024 Orlando, Fl 32896-0024

Zales PO Box 183015 Columbus, OH 43218-3015

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Fill in this inf	ormation to	identify your case	: :	Check one box only as directed in this form and in Form 122A-1Supp:
Debtor 1	Andres First Name	Alberto Middle Name	Gomez Last Name	1. There is no presumption of abuse.
Debtor 2 (Spouse, if filing) United States Ba Case number		Middle Name or the: NORTHERN D	Last Name	2. The calculation to determine if a presumption of abuse applies will be made under Chapter 7 Means Test Calculation (Official Form 122A-2). 3. The Means Test does not apply now because of qualified military service but it could apply
(if known)	4004.4			later. Check if this is an amended filing
Official Form Chapter 7 S		of Your Current	t Monthly In	come 12/15
accurate. If more information applicate exempted from	space is neede es. On the top on a presumption omplete and file	ed, attach a separate s of any additional page n of abuse because y	sheet to this form es, write your nam ou do not have pr	ng together, both are equally responsible for being Include the line number to which the additional e and case number (if known). If you believe that you imarily consumer debts or because of qualifying ption of Abuse Under § 707(b)(2) (Official Form
Part 1: Ca	Iculate Your	Current Monthly I	Income	

What is	your marital and filing status? Check one only.
□ No	t married. Fill out Column A, lines 2-11.
☐ Ma	rried and your spouse is filing with you. Fill out both Columns A and B, lines 2-11.
 Ma	rried and your spouse is NOT filing with you. You and your spouse are:
	Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11.
	Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C. § 707(b)(7)(B).

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

		Column A Debtor 1	Column B Debtor 2 or non-filing spouse
2.	Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).	\$5,741.37	\$0.00
3.	Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.	\$0.00	\$0.00
4.	All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.	\$0.00	\$0.00

DCD			mez		ase number (if k	
	First Name M	liddle Name Last	Name		Column A Debtor 1	Column B Debtor 2 or non-filing spouse
5.	Net income from operating a k	business, profession, o	or farm			
		Debtor 1	Debtor 2			
	Gross receipts (before all deductions)	\$0.00	\$0.00			
	Ordinary and necessary operation expenses	ng –\$0.00	\$0.00	C		
	Net monthly income from a busi profession, or farm	iness, \$0.00	\$0.00	Copy here →	\$0.00	\$0.00
6.	Net income from rental and ot	ther real property				
		Debtor 1	Debtor 2			
	Gross receipts (before all deductions)	\$0.00	\$0.00			
	Ordinary and necessary operation expenses	ng –\$0.00	\$0.00	Сору		
	Net monthly income from rental other real property	or \$0.00	\$0.00		\$0.00	\$0.00
7.	Interest, dividends, and royalt	ties			\$0.00	\$0.00
8.	Unemployment compensation	1			\$0.00	\$0.00
	Do not enter the amount if you obenefit under the Social Security					
	For you		\$0.	00		
	For your spouse		\$0.	00		
9.	Pension or retirement income was a benefit under the Social S	,	nount received that		\$0.00	\$0.00
10.	Income from all other sources amount. Do not include any ber or payments received as a victir or international or domestic terro separate page and put the total	nefits received under the m of a war crime, a crim orism. If necessary, list	e Social Security A e against humanity	ct ′,		
	Total amounts from separate pa			+		+
11.	Calculate your total current m Add lines 2 through 10 for each	column.	_		\$5,741.37	+ \$0.00 = \$5
	Then add the total for Column A	A to the total for Column	В.	ι		Total c

Case 15-44971-mxm7 Doc 1 Filed 12/10/15 Entered 12/10/15 14:53:49 Page 69 of 79 Debtor 1 **Andres** Alberto Gomez Case number (if known) First Name Middle Name Last Name Part 2: **Determine Whether the Means Test Applies to You** 12. Calculate your current monthly income for the year. Follow these steps: \$5,741.37 12a. Χ 12 Multiply by 12 (the number of months in a year). \$68,896.44 12b. The result is your annual income for this part of the form. 12b. 13. Calculate the median family income that applies to you. Follow these steps: Fill in the state in which you live. **Texas** Fill in the number of people in your household. 3 \$62,636.00 To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 14. How do the lines compare? Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse. Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2. 14b. Go to Part 3 and fill out Form 122A-2. Part 3: Sign Below By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct. X /s/ Andres Alberto Gomez Signature of Debtor 2 Signature of Debtor 1 Date 12/10/2015 MM / DD / YYYY MM / DD / YYYY If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

1 111 111 (1115 11	nformation to ide	entify your case				the appropriate I s 40 or 42:	box as directed
Debtor 1	Andres	Alberto	Gomez				
	First Name	Middle Name	Last Nam	ıe	According	ng to the calculation re	equired by this
Debtor 2 (Spouse, if filing	g) First Name	Middle Name	Last Nam	 ne			
		L. NORTHERN D	JETRICT O	E TEVAC	1. 11	nere is no presumption	1 of abuse.
	ankruptcy Court for t	ne: NORTHERN D	ISTRICT O	r iexas	2. TI	nere is a presumption	of abuse.
Case number (if known)					☐ Chec	k if this is an amende	d filing
					_		
Official Forr	n 122A-2						
	-	alaulatian					404
napter / i	Means Test C	aiculation					12/ ⁻
	rm, you will need y	our completed copy	of Chapter	7 Statement of Y	our Current	Monthly Income (Offi	cial Form
22A-1).							
-						ally responsible for	-
	ie space is needed, lies. On the top of a					r to which the addition nown).	nai
Part 1: D	etermine Your A	djusted Income					
. Copy your t	total current monthl	y income	Copy lin	e 11 from Officia	I Form 122A	-1 here 🗻	. 1. \$5,741.3
Did you fill	out Column B in Pa	rt 1 of Form 122A-1	?				
☐ No. Fil	I in \$0 for the total or	n line 3.					
✓ Yes. Is	s your spouse filing w	ith you?					
No	o. Go to line 3.						
_ □ Y€	es. Fill in \$0 for the to	otal on line 3.					
	current monthly in	-			ncome not u	sed to pay for	
On line 11, 0	Column B of Form 12 ehold expenses of yo			me you reported f	or your spous	se NOT regularly used	I
On line 11, 0 for the hous		ou or your dependent		me you reported t	or your spous	se NOT regularly used	I
On line 11, 0 for the hous	ehold expenses of yo	ou or your dependent n line 3.		me you reported t	or your spous	se NOT regularly used	I
On line 11, 0 for the hous No. Fil	ehold expenses of your service of the lin \$0 for the total or the information between the line of the	ou or your dependent n line 3. pelow:	s?			se NOT regularly used	I
On line 11, 0 for the hous No. Fil Yes. F State e For exa	ehold expenses of your state of the total or all in \$0 for the total or all in the information beach purpose for whample, the income is to support people of	ou or your dependent in line 3. pelow: iich the income was used to pay your spo	s?	Fill in the amo are subtracting your spouse's	unt you g from	se NOT regularly used	I
On line 11, 0 for the hous No. Fil Yes. F State e For exa debt or	ehold expenses of your state of the total or all in \$0 for the total or all in the information beach purpose for whample, the income is to support people of	ou or your dependent in line 3. pelow: iich the income was used to pay your spo	s?	Fill in the amo	unt you g from	se NOT regularly used	I
On line 11, 0 for the hous No. Fil Yes. F State e For exa debt or	ehold expenses of your state of the total or all in \$0 for the total or all in the information beach purpose for whample, the income is to support people of	ou or your dependent in line 3. pelow: iich the income was used to pay your spo	s?	Fill in the amo	unt you g from	se NOT regularly used	I
On line 11, 0 for the hous No. Fil Yes. F State e For exa debt or	ehold expenses of your state of the total or all in \$0 for the total or all in the information beach purpose for whample, the income is to support people of	ou or your dependent in line 3. pelow: iich the income was used to pay your spo	s?	Fill in the amo	unt you g from	se NOT regularly used	
On line 11, 0 for the hous No. Fil Yes. F State e For exa debt or	ehold expenses of your state of the total or all in \$0 for the total or all in the information beach purpose for whample, the income is to support people of	ou or your dependent in line 3. pelow: iich the income was used to pay your spo	s?	Fill in the amorare subtracting your spouse's	unt you g from income	se NOT regularly used	<u>√</u> - \$0.0

4. Adjust your current monthly income. Subtract the total on line 3 from line 1.

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Debtor 1 Andres Alberto Gomez Case number (if known) Last Name

Part 2: Calculate Your Deductions from Your Income

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not deduct any amounts that you subtracted from your spouse's income in line 3 and do not deduct any operating expenses that you subtracted from income in lines 5 and 6 of Form 122A-1.

If your expenses differ from month to month, enter the average expense.

Whenever this part of the form refers to you, it means both you and your spouse if Column B of Form 122A-1 is filled in.

5. The number of people used in determining your deductions from income

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

3

National Standards You must use the IRS National Standards to answer the questions in lines 6-7.

Food, clothing and other items: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items. \$1,249.00

7. Out-of-pocket health care allowance: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories-people who are under 65 and people who are 65 or older--because older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

People who are under 65 years of age			
7a. Out-of-pocket health care allowance per person	\$60.00		
7b. Number of people who are under 65	х3		
7c. Subtotal. Multiply line 7a by line 7b.	\$180.00	Copy here -	\$180.00
People who are 65 years of age or older			
7d. Out-of-pocket health care allowance per person	\$144.00		
7e. Number of people who are 65 or older	х		
7f. Subtotal. Multiply line 7d by line 7e.	\$0.00	Copy here → + _	\$0.00
7g. Total. Add lines 7c and 7f			Copy total here → 7g.

\$180.00

Case 15-44971-mxm7 Doc 1 Filed 12/10/15 Entered 12/10/15 14:53:49 Page 72 of 79 **Andres** Debtor 1 Alberto Gomez Case number (if known) First Name Middle Name Last Name **Local Standards** You must use the IRS Local Standards to answer the questions in lines 8-15. Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts: ■ Housing and utilities -- Insurance and operating expenses ■ Housing and utilities -- Mortgage or rent expenses To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office. Housing and utilities -- Insurance and operating expenses: Using the number of people you entered in line 5, \$589.00 fill in the dollar amount listed for your county for insurance and operating expenses. Housing and utilities -- Mortgage or rent expenses: 9a. Using the number of people you entered in line 5, fill in the dollar amount listed \$1,252.00 for your county for mortgage or rent expenses. 9b. Total average monthly payment for all mortgages and other debts secured by your home. To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60. Name of the creditor Average monthly payment **American Airlines Federal Credit Union** \$363.38 Repeat this Copy amount on Total average monthly payment \$363.38 \$363.38 here line 33a. 9c. Net mortgage or rent expense. Copy Subtract line 9b (total average monthly payment) from line 9a (mortgage or \$888.62 here \$888.62 rent expense). If this amount is less than \$0, enter \$0. 10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and affects the calculation of your monthly expenses, fill in any additional amount you claim. Explain whv: 11. Local transportation expenses: Check the number of vehicles for which you claim an ownership or operating expense. ☐ 0. Go to line 14. 1. Go to line 12. 2 or more. Go to line 12. 12. Vehicle operation expense: Using the IRS Local Standards and the number of vehicles for which you claim the

operating expenses, fill in the Operating Costs that apply for your Census region or metropolitan statistical area.

\$554.00

 Debtor 1
 Andres
 Alberto
 Gomez
 Case number (if known)

 First Name
 Middle Name
 Last Name

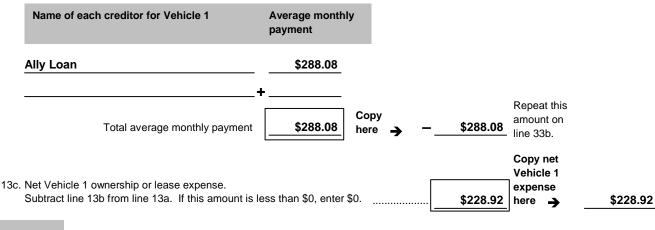
13. Vehicle ownership or lease expense: Using the IRS Local Standards, calculate the net ownership or lease expense for each vehicle below. You may not claim the expense if you do not make any loan or lease payments on the vehicle. In addition, you may not claim the expense for more than two vehicles.

Vehicle 1 Describe Vehicle 1: 2012 Ford Mustang

- 13b. Average monthly payment for all debts secured by Vehicle 1.

Do not include costs for leased vehicles.

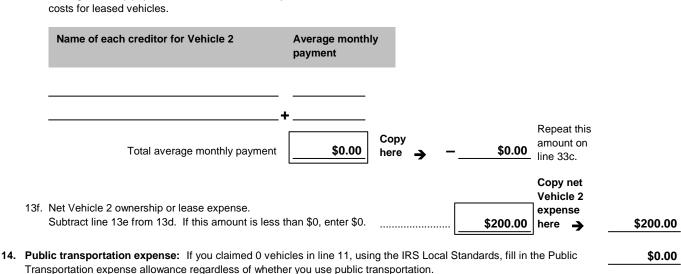
To calculate the average monthly payment here and on line 13e, add all amounts that are contractually due to each secured creditor in the 60 months after you filed for bankruptcy. Then divide by 60.



Vehicle 2

Describe Vehicle 2:

- 13e. Average monthly payment for all debts secured by Vehicle 2. Do not include costs for leased vehicles



15. Additional public transportation expense: If you claimed 1 or more vehicles in line 11 and if you claim that you may also deduct a public transportation expense, you may fill in what you believe is the appropriate expense, but you may not claim more than the IRS Local Standard for Public Transportation.

\$0.00

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Debtor 1 **Andres** Alberto Gomez Case number (if known) First Name Middle Name Last Name Other Necessary Expenses In addition to the expense deductions listed above, you are allowed your monthly expenses for the following IRS categories. 16. Taxes: The total monthly amount that you will actually owe for federal, state and local taxes, such as income taxes, \$1,166.16 self-employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes. Do not include real estate, sales, or use taxes. 17. Involuntary deductions: The total monthly payroll deductions that your job requires, such as retirement contributions, \$0.00 union dues, and uniform costs. Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings. 18. Life insurance: The total monthly premiums that you pay for your own term life insurance. If two married people are \$13.67 filing together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on your dependents, or a non-filing spouse's life insurance, or for any form of life insurance other than term. 19. Court-ordered payments: The total monthly amount that you pay as required by the order of a court or administrative \$600.00 agency, such as spousal or child support payments. Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35. 20. Education: The total monthly amount that you pay for education that is either required: \$0.00 as a condition for your job, or for your physically or mentally challenged dependent child if no public education is available for similar services. 21. Childcare: The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool. \$0.00 Do not include payments for any elementary or secondary school education. 22. Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that \$0.00 is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7. Payments for health insurance or health savings accounts should be listed only in line 25. 23. Optional telephones and telephone services: The total monthly amount that you pay for telecommunication services \$0.00 for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer. Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 122A-1, or any amount you previously deducted. 24. Add all of the expenses allowed under the IRS expense allowances. \$5,669.37 Add lines 6 through 23.

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Debto	r 1	Andres	Alberto	Gomez	Case	e number (if known)		
		First Name	Middle Name	Last Name				
Add	litional	Expense Deduction		additional deductions ot include any expens				
25.	insura		rance, and health sav			e monthly expenses for health sary for yourself, your		
	Health	n insurance		\$176.02				
	Disab	ility insurance		\$1.08				
	Health	n savings account		+\$0.00	1			
	Total			\$177.10	Copy total here	→		\$177.10
	Do yo	u actually spend thi	is total amount?					
	□ 1	No. How much do y	ou actually spend?					
	7	⁄es						
26.	will co	ontinue to pay for the per of your househo	e reasonable and ne ld or member of your	cessary care and supp	oort of an elderly, chois unable to pay fo	monthly expenses that you nronically ill, or disabled or such expenses. These S.C. § 529A(b).		\$0.00
27.		_				at you incur to maintain the rother federal laws that apply.		\$0.00
	By lav	v, the court must ke	ep the nature of thes	e expenses confident	ial.			
28.	Addit		costs. Your home e	energy costs are includ	ded in your insurand	ce and operating expenses		
	•	•	eve home energy cos ess amount of home		the home energy co	sts included in expenses on		
		0 ,	trustee documentationable and necessary	,	enses, and you mus	t show that the additional		
29.	\$156.		ou pay for your depe			y expenses (not more than rears old to attend a private or		\$0.00
		• •		on of your actual expe already accounted for	•	t explain why the amount		
	* Subj	ject to adjustment o	n 4/01/16, and every	3 years after that for	cases begun on or	after the date of adjustment.		
30.	highe	r than the combined	d food and clothing al	•	National Standards.	od and clothing expenses are That amount cannot be more		
		-		al allowance, go onlin be available at the ba		· · · · · · · · · · · · · · · · · · ·		
	You m	nust show that the a	additional amount cla	imed is reasonable an	nd necessary.			
31.		-		mount that you will co zation. 26 U.S.C. § 17		in the form of cash or financial	+	\$28.75
32.		all of the additional nes 25 though 31.	l expense deduction	ıs.				\$205.85

Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19.

Total amount of all past-due priority claims.....

\$0.00

 $\div 60 =$

Debto			dres Alberto Gomez Cas Name Middle Name Last Name		Case	nun	nber (if known)					
36.	For	more i	nformation, go o	case under Chapt online using the link Bankruptcy Basics	c for Bankruptc	y Basics specified						
	☑	No. Yes.	Go to line 37. Fill in the follow	wing information.								
			Projected mon	thly plan payment	if you were filin	g under Chapter	13	_				
			Administrative	lier for your district Office of the Unite olina) or by the Exe istricts).	d States Courts	s (for districts in A	Alabama		x	%		
			the link specifi	f district multipliers ed in the separate ble at the bankrupt	instructions for	this form. This li	-					
			Average mont	hly administrative e	expense if you	were filing under (Chapter 13	3 [Copy here	total	
37.			the deductions 33e through 36.	s for debt paymen	t.							\$651.46
Tota	al De	ductio	ns from Incom	e								
38.	Add	l all of	the allowed de	eductions.								
				penses allowed un		\$5,669.37						
	Сор	y line 3	32, All of the ad	lditional expense d	eductions	\$205.85						
	Сор	y line 3	37, All of the de	eductions for debt p	ayment+	\$651.46						
	Tota	al dedu	ctions			\$6,526.68	Copy to	tal h	ere →			\$6,526.68
Par	t 3:	D	etermine Wh	nether There Is	a Presump	tion of Abuse)					
39.	Calo	culate	monthly dispo	sable income for (60 months							
	39a.	. Cop	y line 4, <i>adjust</i> e	ed current monthly	income	\$5,741.37						
	39b.	. Cop	y line 38, Total	deductions		\$6,526.68						
	39c.		nthly disposable tract line 39b fr	income. 11 U.S.C om line 39a.	:. § 707(b)(2).	(C705 24)	Copy here		(\$785.31)	-		
		For	the next 60 mor	nths (5 years)					x 60			
	39d.	. Tota	al. Multiply line	39c by 60			39	9d.	(\$47,118.60)	Copy here	→	(\$47,118.60)
40.	Find	d out w	hether there is	s a presumption o	f abuse. Chec	k the box that app	olies:					
			ine 39d is less Part 5.	than \$7,475*. On	the top of page	1 of this form, ch	neck box 1,	, The	ere is no presum	ption of	abuse	
				e than \$12,475*. C 4 if you claim spec		-		κ 2, ີ	There is a presu	mption (of abus	se.
		The li	ine 39d is at lea	ast \$7,475*, but no	ot more than \$	12,475*. Go to lin	e 41.					
	_	* Sub	ject to adjustme	ent on 4/01/16, and	every 3 years	after that for case	es filed on o	or af	ter the date of a	djustme	nt.	

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	Cas	se 1	5-44971-	mxm7 Doc 1 F	iled 12/10/15	Entered 12/10)/15 14:53:49	Page 78 of 79
Debto	or 1		dres Name	Alberto Middle Name	Gomez Last Name	Case n	umber (if known) _	
41.	41a	A S	ummary of Y		ties and Certain Stat	ebt. If you filled out istical Information Scheen		
							x .25	
	41b		6 of your tota tiply line 41a	al nonpriority unsecu by 0.25.	ured debt. 11 U.S.C	C. § 707(b)(2)(A)(i)(I).		Copy here ->
42.	is e	nough		of your unsecured, r		cting all allowed deduc	ctions	
			39d is less t l Part 5.	nan line 41b. On the	top of page 1 of this	form, check box 1, <i>Thei</i>	re is no presumption	n of abuse.
			-	to or more than line art 4 if you claim speci		page 1 of this form, chec hen go to Part 5.	k box 2, <i>There is a</i>	presumption of abuse.
Pai	rt 4:	G	ive Details	S About Special (Circumstances			
43.		•		ial circumstances th onable alternative?	•	expenses or adjustme 2)(B).	ents of current mo	nthly income for
	$\overline{\mathbf{V}}$	No.	Go to Part 5	j.				
		Yes.		llowing information. Am. You may include e	-	ect your average monthl n line 25.	y expense or incom	ne adjustment
			adjustments		onable. You must als	rcumstances that make so give your case trusted		
			Give a de	tailed explanation of	the special circum	stances		Average monthly expense or income adjustment
			-					-
Pai	rt 5:	s	ign Below					
	Bys	signing	here, I decla	re under penalty of pe	erjury that the informa	ation on this statement a	and in any attachme	nts is true and correct.
			dres Albert ure of Debtor			X Signature of D	Debtor 2	
	I	_	12/10/2015 MM / DD / YY	YY		DateMM / D	D / YYYY	_
						7 5	=	

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Current Monthly Income Calculation Details

In re: Andres Alberto Gomez

Case Number:

Chapter: 7

2. Gross wages, salary, tips, bonuses, overtime and commissions.

Debtor or Spouse's Income	Description (escription (if available)								
	6 Months Ago	5 Months Ago	4 Months Ago	3 Months Ago	2 Months Ago	Last Month	Avg. Per Month			

<u>Debtor</u>

\$4,812.39 \$4,920.00 \$5,335.17 \$5,473.57 \$8,534.82 \$5,372.25 **\$5,741.37**